



Operator Name: Sabine Operating Services, Inc. Lease Name: Ownbey Well #: 3-06  
 Sec. 10 Twp. 33 S. R. 13  East  West County: Chautaugua

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  <b>CDL/CNLGR, IDL</b>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample  <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>Drum</td> <td>659</td> <td>+253</td> </tr> <tr> <td>Redd</td> <td>700</td> <td>+212</td> </tr> <tr> <td>South Mound</td> <td>819</td> <td>+93</td> </tr> <tr> <td>Lenapah</td> <td>850</td> <td>+62</td> </tr> <tr> <td>Wayside</td> <td>875</td> <td>+37</td> </tr> <tr> <td>Altamont</td> <td>930</td> <td>-18</td> </tr> <tr> <td>Weiser</td> <td>969</td> <td>-57</td> </tr> </table>	Name	Top	Datum	Drum	659	+253	Redd	700	+212	South Mound	819	+93	Lenapah	850	+62	Wayside	875	+37	Altamont	930	-18	Weiser	969	-57
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CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12.25	8.625	24	41	OWC	30	
Casing	6.75	4.5	10.50	1050	Thickset	110	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	970' - 990'	200 gal. 15% HCL 4200 gal. water and gel	970'

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. TBD			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
TBD	TBD	TBD	TBD	TBD	TBD

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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**RECEIVED**  
KANSAS CORPORATION COMMISSION

**JUN 18 2007**



CONSOLIDATED OIL WELL SERVICES, INC.  
P.O. BOX 884, CHANUTE, KS 66720  
620-431-9210 OR 800-467-8676

TICKET NUMBER 10992  
LOCATION Barthesville  
FOREMAN Tracy L. Williams

TREATMENT REPORT & FIELD TICKET  
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-29-06	7886	Bunbey 3-02	10	33S	13E	CG
CUSTOMER Sabine Operating			TRUCK #		DRIVER	
MAILING ADDRESS			492		Tim	
CITY			407		John	
STATE			412 T56		Chad	
ZIP CODE						

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 1062 CASING SIZE & WEIGHT 4 1/2 10.5  
CASING DEPTH 1050 DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
SLURRY WEIGHT \_\_\_\_\_ SLURRY VOL \_\_\_\_\_ WATER gal/sk \_\_\_\_\_ CEMENT LEFT in CASING 0  
DISPLACEMENT 16.24 DISPLACEMENT PSI 400 MIX PSI 0 RATE 4.5

REMARKS: Broke circulation + ran 110 sks of Thickset cement with 5#  
gilsonite + .4# phenoseal. Shut down + washed up behind plug. Pumped  
plug to bottom + set shoe. Shut in

Circulated cement to surface

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Production Casing		800.00
5406	40	MILEAGE		126.00
5402	1050	Footage		128.50
5407	min	Ten Mileage		225.00
5501C	4hrs	Transport		392.00
1107A	80#	Phenoseal		80.00
1110	550#	Gilsonite		253.00
1123	5000gal	City Water		64.00
1126A	110sks	Thickset Cement		1611.50
4404	1	4 1/2" Rubber Plug		40.00
			6.3%	SALES TAX
				129.05
				ESTIMATED
				TOTAL RECEIVED
				3999.05

# 210828

AUTHORIZATION \_\_\_\_\_ TITLE \_\_\_\_\_ KANSAS CORPORATION COMMISSION

JUN 18 2007

CONSERVATION DIVISION  
WICHITA, KS