

*Ku
Dwy
2/11/09*

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 4787

Name: TDI, Inc

Address 1: 1310 Bison Road

Address 2: _____

City: Hays State: KS Zip: 67601 + 9696

Contact Person: Tom Denning

Phone: (785) 628-2593

CONTRACTOR: License # 33237

Name: Anderson Drilling Company

Wellsite Geologist: Herb Deines

Purchaser: none

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SIOW

Gas ENHR SIGW

CM (Coal Bed Methane) Temp. Abd.

Dry Other _____
(Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to Enhr. Conv. to SWD

Plug Back: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

11-29-2008 12-04-2008 none

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 051-25815-00-00

Spot Description: _____

S/2 NW NE SW Sec. 21 Twp. 14 S. R. 16 East West

2010 Feet from North / South Line of Section

1650' Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Ellis

Lease Name: Dominic Well #: 4

Field Name: Dreiling

Producing Formation: none

Elevation: Ground: 1868' Kelly Bushing: 1873'

Total Depth: 3500' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: 211' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: 995 Feet

If Alternate II completion, cement circulated from: 995

feet depth to: surface w/ 110 sx cmt.

Drilling Fluid Management Plan AH II NCR 3-11-09
(Data must be collected from the Reserve Pit)

Chloride content: 39,000 ppm Fluid volume: 800 bbls

Dewatering method used: evaporation

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]

Title: President Date: 2-6-09

Subscribed and sworn to before me this 06 day of February,

20 09

Notary Public: [Signature]

Date Commission Expires: 29 Aug 2012

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

RECEIVED
KANSAS CORPORATION COMMISSION

HOWARD R. SLOAN
Notary Public - State of Kansas
My Appt. Expires 29 Aug 2012

FEB 05 2009

Operator Name: TDI, Inc Lease Name: Dominic Well #: 4
 Sec. 21 Twp. 14 S. R. 16 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" 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: Radiation Guard Log Neutron/Density Porosity Log Micro Resistivity Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrie</td> <td>970'</td> <td>+903'</td> </tr> <tr> <td>Topeka</td> <td>2952'</td> <td>-1079'</td> </tr> <tr> <td>Heebner</td> <td>3072'</td> <td>-1199'</td> </tr> <tr> <td>Lansing /KC</td> <td>3124'</td> <td>-1251'</td> </tr> <tr> <td>Base KC</td> <td>3349'</td> <td>-1476'</td> </tr> <tr> <td>Arbuckle</td> <td>3373'</td> <td>-1500'</td> </tr> <tr> <td>RTD</td> <td>3500'</td> <td>-1627'</td> </tr> </table>	Name	Top	Datum	Anhydrie	970'	+903'	Topeka	2952'	-1079'	Heebner	3072'	-1199'	Lansing /KC	3124'	-1251'	Base KC	3349'	-1476'	Arbuckle	3373'	-1500'	RTD	3500'	-1627'
Name	Top	Datum																							
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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 1/4"	8 5/8"	23#	211'	common	150sx	3%cal 2% gel
production	7 7/8"	5 1/2"	14#	3497'	EA-2	200	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	surface to 995'	SMD	110sx	Circulated to surface

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
	Well is TA'd. Waiting on completion.		

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TUBING RECORD:	Size: none	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. none		Producing Method: <input type="checkbox"/> Flowing <input 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

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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ALLIED CEMENTING CO., LLC. 32966

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Russell, Ks

DATE <u>11-29-09</u>	SEC. <u>21</u>	TWP. <u>14</u>	RANGE <u>16</u>	CALLED OUT <u>4:00 PM</u>	ON LOCATION <u>6:30 PM</u>	JOB START <u>8:30 PM</u>	JOB FINISH <u>11:00 PM</u>
LEASE <u>Dominic</u>	WELL# <u>4</u>	LOCATION <u>walker Exit + I-70, 35</u>			COUNTY <u>Ellis</u>	STATE <u>Ks</u>	
OLD OR <u>NEW</u> (Circle one)			<u>1 1/2 w, 1/3</u>				

CONTRACTOR A+A Drilling

TYPE OF JOB Surface

HOLE SIZE 12 1/2" T.D. 222'

CASING SIZE 8 3/8" DEPTH 221'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200# MINIMUM 0

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 BBLs of water

OWNER T D I Inc.

CEMENT AMOUNT ORDERED 150 sx Common 3%cc 2%Gel

EQUIPMENT

PUMP TRUCK CEMENTER Rick H.

181 HELPER Alvin R.

BULK TRUCK DRIVER Chuck

410

BULK TRUCK DRIVER Jeff W.

COMMON	<u>150</u>	@	<u>13.50</u>	<u>2,025.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>20.25</u>	<u>60.75</u>
CHLORIDE	<u>5</u>	@	<u>51.50</u>	<u>257.50</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>158</u>	@	<u>2.25</u>	<u>355.50</u>
MILEAGE	<u>158 x .10 x 18</u>			<u>300.00</u>
TOTAL				<u>2,998.75</u>

REMARKS:
pipe on bottom, break circulation, mixed 150 sx Common 3%cc 2% Gel and displaced with 13 BBLs of water and shut in. Cement did Circulate

SERVICE

DEPTH OF JOB	<u>221'</u>			
PUMP TRUCK CHARGE			<u>991.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>18</u>	@	<u>7.00</u> <u>126.00</u>	
MANIFOLD		@		
		@		
		@		
TOTAL				<u>1117.00</u>

CHARGE TO: T D I Inc.

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@			
_____	@			
_____	@			
_____	@			
_____	@			
TOTAL				_____

To Allied Cementing Co., LLC--
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME x Eldo Senesac

SIGNATURE x Eldo Senesac

SALES TAX (If Any) _____

TOTAL CHARGES _____

DISCOUNT _____ IF PAID IN 30 DAYS

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CHARGE TO: T D I

ADDRESS

CITY, STATE, ZIP CODE

TICKET
No 15229

PAGE 1 OF 2

SERVICE LOCATIONS 1. <u>Hays, Ks</u>	WELL/PROJECT NO. <u>#4</u>	LEASE <u>Dominic</u>	COUNTY/PARISH <u>Ellis</u>	STATE <u>Ks</u>	CITY	DATE <u>12-5-08</u>	OWNER <u>SAME</u>
2. <u>Ness City, Ks</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>A+A</u>	RIG NAME/NO.	SHIPPED <u>ET</u>	DELIVERED TO <u>location</u>	ORDER NO.	
3.	WELL TYPE <u>oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>2 stage cement long string</u>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UM		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE #111	40		mi		7.00	280.00
579		1			Pump Charge (2-stage)	1		ea		1900.00	1900.00
221		1			Liquid RCL	4		gal		26.00	104.00
281		1			Mud Flush	500		gal		1.00	500.00
290		1			D-Air	4		gal		35.00	140.00
402		1			Centralizers	8		ea	5 1/2"	100.00	800.00
403		1			Baskets	3		ea		300.00	900.00
407		1			Insert Float Shoe w/fill	1		ea		325.00	325.00
408		1			DV Tool	1		ea		3200.00	3200.00
419		1			Rotating Head	1		ea		250.00	250.00
417		1			D.V.L.D. Plug+Baffle	1		ea		200.00	200.00

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X Allen Ward
DATE SIGNED 12-6-08 TIME SIGNED 0405 A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL 1	8599.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				page 2	2620.75
WE UNDERSTOOD AND MET YOUR NEEDS?				subtotal	16219.75
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				Ellis TAX 5.3%	647.21
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TOTAL	16,866.96
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Nick Korda APPROVAL

Thank You!

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WICHITA KS



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

TICKET No. 15229

CUSTOMER T D I WELL #4 Dominic DATE 12-5-08 PAGE 2 OF 2

PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY		UNIT PRICE	AMOUNT
		LOC	ACCT	DEF			QTY	U/M		
3290		2				Standard Cement	200	sk	13.00	2600.00
330		2				SAND Cement	135	sk	16.00	2160.00
276		2				Flacole	75	#	1.50	112.50
283		2				Salt	1000	#	.20	200.00
284		2				Calseal	9	sk	30.00	270.00
285		2				CFR	100	#	4.50	450.00
581		2				SERVICE CHARGE	335	sk	1.80	603.00
583		2				MILEAGE CHARGE	40	MILES	1.75	70.00
									CONTINUATION TOTAL	7620.75

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JOB LOG

SWIFT Services, Inc.

DATE 12-5-08 PAGE NO. 1

CUSTOMER T D I WELL NO. #4 LEASE Domanic JOB TYPE 2-stage TICKET NO. 15229

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2315							onloc w/FE
								RTD 3500'
								5 1/2" x 14# x 3506' x 43'
								Cent 4, 4, 11, 15, 18, 21, 24
								Baskets 26, 61, 75
								DV 62 @ 977'
	2330							start FE
	0115							Break Circ.
	0215	4	0			150		Start Pre-Flushes 500 gal Mud Flush 20 bbl KCL Flush
	0223	5	32/0			250		Start Cement 200 sks EA-2
	0233		48					End Cement
								Wash P&L
								Drop Plug L.D.
	0238	6	0			200		Start Displacement
	0246	5	50			300		Catch Cement 20 bbl KCL in last tank
	0253		84.5			850/300		Land Plug
								Release pressure
	0300							Float Held Drop Opening Plug
	0308	2.5	6					Plug R.H. 25 sks SMD.
	0310					1200		Open D.V.
	0311	6	0			150		Start Cement 110 sks SMD.
	0323		70					End Cement / Cement circulating
								Drop Closing Plug
	0328	4	0			150		Start Displacement
	0335		24			350		Land Plug
						1400		Close DV
								Release Pressure
								DV Closed

~~CIP 400 sks to P~~

Thank you
Nick Sosh & Shane

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