

Handwritten initials and date: KCC 2/24/09

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32887
 Name: Endeavor Energy Resources, LP
 Address: PO Box 40
 City/State/Zip: Delaware, OK 74027
 Purchaser: NA
 Operator Contact Person: Joe Driskill
 Phone: (918) 467-3111
 Contractor Name: Well Refined Drilling
 License: 33072
 Wellsite Geologist: NA
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 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./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

10-20-08 Spud Date or Recompletion Date	10-21-08 Date Reached TD	NA Completion Date or Recompletion Date

API No. 15 - 125-31669-0000
 County: Montgomery
SE SE NE Sec. 9 Twp. 34 S. R. 17 East West
2310 feet from S / (circle one) Line of Section
330 feet from / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) SE NW SW
 Lease Name: Bill White Well #: 9-4
 Field Name: Coffeyville
 Producing Formation: NA
 Elevation: Ground: 756.4 Kelly Bushing: _____
 Total Depth: 980 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 22.7 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 22.7
 feet depth to surface w/ 50 sx cmt.

Drilling Fluid Management Plan *AH II* *Nov 4-6-09*
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 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: Joe Driskill
 Title: Operations Superintendent Date: 2-24-09
 Subscribed and sworn to before me this 24th day of February, 2009.
 Notary Public: Stephanie Lakey
 Date Commission Expires: April 18, 2009

STEPHANIE LAKEY
 NOTARY PUBLIC-STATE OF OKLAHOMA
 NOWATA COUNTY
 MY COMMISSION EXPIRES APRIL 18, 2009
 COMMISSION #05003715

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAR 02 2009
 CONSERVATION DIVISION
 WICHITA, KS

Operator Name: Endeavor Energy Resources, LP Lease Name: Bill White Well #: 9-4
 Sec. 9 Twp. 34 S. R. 17 East West County: Montgomery

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Compensated Density - Neutron Porosity
 Deep Induction

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Summit	406	
Mulky	442	
Squirrel	478	
Weir	658	
Rowe	832	
Mississippi	952	

CASING RECORD <input 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	12.250	8.625	24#	22' 7"	Portland	50	
Production	6.75	4.5	11.6#	976	Class A	110	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
..... Perforate				
..... Protect Casing				
..... Plug Back TD				
..... 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

RECEIVED
 KANSAS CORPORATION COMMISSION
 MAR 02 2009
 CONSERVATION DIVISION
 WICHITA, KS

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method					
not complete	<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 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled _____
 (If vented, Submit ACO-18.) Other (Specify) _____

Well Refined Drilling Company, Inc.

4230 Douglas Road - Thayer, KS 66776

Contractor License # 33072 -

620-839-5581/Office; 620-432-6170/Jeff Cell; 620-839-5582/FAX.

HAVE RIG
WILL DIG
Rig # 5

Rig #:	5	Lic # 32887	S9	T34S	R17E
API #:	15-125-31669-0000		Location	SE,SE,NE	
Operator:	Endeavor Energy Resources LP		County	Montgomery	
Address:	PO Box 40				
	Delaware, Ok 74027				

				Gas Tests			
Well #:	9-4	Lease Name:	Bill White	Depth	Oz	Orifice	flow MCF
Location:	2310 FNL	Line		205			No Flow
	330 FEL	Line		305			No Flow
Spud Date:	10/20/2008			330	5	1/2"	7.98
Date Completed:	10/21/2008		TD: 980	430			Gas Check Same
Driller:	Josiah Kephart			530			Gas Check Same
Casing Record	Surface	Production		630			Gas Check Same
Hole Size	12 1/4"	6 3/4"		655			Trace
Casing Size	8 5/8"			705			Trace
Weight				755			Trace
Setting Depth	22' 7"			805			Trace
Cement Type	Portland			830			Trace
Sacks	Service Company			855			Trace
Feet of Casing				905			Trace
				930			Trace
Note:				955			Trace
				980			Trace
08LJ-102108-R5-013-Bill White 9-4-EER							

Well Log								
Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	1.5	overburden	306	308	Anna blk shale	483	502	shale
1.5	6	clay	308	311	shale	502	504	coal
6	11	shale	311	313	Lexington coal	504	514	shale
11	14	blk shale	313	316	shale	514	516	lime
		wet	316	318	Lower Lexington coal	516	521	blk shale
14	16	lime	318	335	sand	521	565	shale
16	68	shale	335	340	shale	565	570	Cattleman sand
68	122	lime	340	373	sand	570	573	lime
122	125	shale			oil show	573	577	sand
125	140	lime	373	406	lime	577	584	shale
140	160	shale	406	409	Summit blk shale	584	587	lime
160	207	sand	409	442	lime	587	593	shale
		wet	442	445	Mulky blk shale	593	599	sand
207	285	shale	445	453	lime	599	603	shale
285	303	lime	453	455	shale	603	633	sand
290		added water	455	460	lime	633	658	shale
		oil odor	460	478	shale	658	660	Weir coal
303	306	shale	478	483	Squirrel sand	660	676	shale

RECEIVED
KANSAS CORPORATION COMMISSION

MAR 02 2009

CONSERVATION DIVISION
WICHITA, KS

API No.
15-25-31669
OTC/OCC Operator No.

CEMENTING REPORT
To Accompany Completion Report

Form 1002C
(Rev. 2001)

OKLAHOMA CORPORATION COMMISSION
Oil & Gas Conservation Division
Post Office Box 52000
Oklahoma City, Oklahoma 73152-2000
OAC 165:10-3-4(h)

All operators must include this form when submitting the Completion Report, (Form 1002A). The signature on this statement must be that of qualified employees of the cementing company and operator to demonstrate compliance with OAC 165:10-3-4(h). It may be advisable to take a copy of this form to location when cementing work is performed.

TYPE OR USE BLACK INK ONLY

*Field Name Coffeyville		OCC District	
*Operator Endover Energy Resources		OCC/OTC Operator No	
*Well Name/No. Bill White 9-4		County McGon	
*Location 1/4 SE 1/4 SE 1/4 NE 1/4	Sec 4	Twp 34S	Rge 17E

Cement Casing Data	Conductor Casing	Surface Casing	Alternative Casing	Intermediate Casing	Production String	Liner
Cementing Date		10-20-08			10-28-08	
*Size of Drill Bit (Inches)		8 3/4			6 3/4	
*Estimated % wash or hole enlargement used in calculations		50%			30%	
*Size of Casing (inches O.D.)		7			4 1/2	
*Top of Liner (if liner used) (ft.)						
*Setting Depth of Casing (ft.) from ground level		23 ft			976	
Type of Cement (API Class) In first (lead) or only slurry		Class A			Class A	
In second slurry						
In third slurry						
Sacks of Cement Used In first (lead) or only slurry		50			110 scks	
In second slurry						
In third slurry						
Vol of slurry pumped (Cu ft)(14.X15.) in first (lead) or only slurry		59 cuft			174.9 cuft	
In second slurry						
In third slurry						
Calculated Annular Height of Cement behind Pipe (ft)		Surf			Surf	
Cement left in pipe (ft)		10			0	

*Amount of Surface Casing Required (from Form 1000) _____ ft.

*Was cement circulated to Ground Surface? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Was Cement Staging Tool (DV Tool) used? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Was Cement Bond Log run? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If so, Attach Copy)	*If Yes, at what depth? _____ ft

CEMENTING COMPANY AND OPERATOR MUST COMPLY WITH THE INSTRUCTIONS ON REVERSE SIDE RECEIVED KANSAS CORPORATION COMMISSION

* Designates items to be completed by Operator.
Items not so designated shall be completed by the Cementing Company.

MAR 02 2009

CONSERVATION DIVISION
WICHITA, KS

Remarks

*Remarks

CEMENTING COMPANY

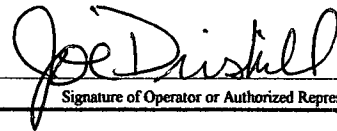
I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that the cementing of casing in this well as shown in the report was performed by me or under my supervision, and that the cementing data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers cementing data only.



Signature of Cementer or Authorized Representative

OPERATOR

I declare under applicable Corporation Commission rule, that I am authorized to make this certification, that I have knowledge of the well data and information presented in this report, and that data and facts presented on both sides of this form are true, correct and complete to the best of my knowledge. This certification covers all well data and information presented herein.



Signature of Operator or Authorized Representative

Name & Title Printed or Typed	
Jason Bell Operator	
Cementing Company	
CONSOLIDATED OIL WELL SERVICES, LLC	
Address	
278 CR 2706	
City	
BARTLESVILLE	
State	Zip
OKLAHOMA	74003
Telephone (AC) Number	
918-338-0808	FAX 918-338-2210
Date	

*Name & Title Printed or Typed	
Joe Distill Operations Super	
*Operator	
Endeavor Energy Resources	
*Address	
PO Box 40	
*City	
Delaware	
*State	*Zip
OK	74027
*Telephone (AC) Number	
918-467-3111	
*Date	
2-24-09	

INSTRUCTIONS

- This form shall be filed by the operator, at the O.C.C. office in Oklahoma City, as an attachment to the Completion Report (Form 1002A) for a producing well or a dry hole.
 - An original of this form shall be filed as an attachment to the Completion Report, (Form 1002A), for each cementing company used on a well.
 - The cementing of different casing strings on a well by one cementing company may be consolidated on one form.
- Cementing Company and Operator shall comply with the applicable portions of OAC 165:10-3-4(h).
- Set surface casing 50 feet below depth of treatable water to be protected and cement from casing shoe to ground surface or as allowed by OAC 165:10-3-4(h).
- IF SETTING ANYTHING OTHER THAN THE FULL AMOUNT OF SURFACE CASING, BE SURE TO FOLLOW CORPORATION COMMISSION RULES.**