

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

Handwritten: 3/24/09

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 31389
Name: Noble Petroleum
Address 1: 3101 N Rock Rd Ste 125
Address 2: _____
City: Wichita State: KS Zip: 67226 + _____
Contact Person: Tim Gulick
Phone: (620) 583-4306
CONTRACTOR: License # 32701
Name: C&G Drilling, Inc.

RECEIVED
KANSAS CORPORATION COMMISSION
MAR 23 2009

Wellsite Geologist: Doug Davis
Purchaser: _____
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.)

CONSERVATION DIVISION
WICHITA, KS

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.: _____
7-01-08 07-19-08 Px A
Spud Date or Date Reached TD Completion Date or
Recompletion Date 3/20/08
Recompletion Date

API No. 15 - 131-20207-0000
Spot Description: Nemaha
sw - ne ^{NE} - se Sec. 15 Twp. 2 S. R. 14 East West
2250 Feet from North / South Line of Section
400 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Nemaha

Lease Name: Studer Well #: 1
Field Name: Wildcat
Producing Formation: _____
Elevation: Ground: 1246 Kelly Bushing: 1255
Total Depth: 3630 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 250 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ PA-Dlg - 4/28/09 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 200 ppm Fluid volume: 400 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: _____
Title: pres. Date: 3/17/09
Subscribed and sworn to before me this 17th day of March,
20 09.
Notary Public: Larry D. French
Date Commission Expires: _____

LARRY D. FRENCH
Notary Public - State of Kansas
My Appt. Expires 8/10/2011

KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
____ UIC Distribution

Operator Name: Noble Petroleum Lease Name: Studer Well #: 1
 Sec. 15 Twp. 2 S. R. 14 East West County: Nemaha

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 (Attach Additional Sheets) 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 checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 1/4	8 5/8	24#	251	Class A	165	3%CC

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
		RECEIVED KANSAS CORPORATION COMMISSION MAR 23 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, Resumed Production, SWD or Enhr. _____		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 Bbbs.	Gas Mcf	Water Bbbs. Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	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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CONSOLIDATED
Oil Well Services, LLC

ENTERED

TICKET NUMBER 18620

LOCATION EURKA

FOREMAN RICK LOONO

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-1-08	5631	Studer # 2				<u>DeWberry</u>
CUSTOMER <u>Noble Petroleum, Inc.</u>						
MAILING ADDRESS <u>3101 N. Rock Rd Ste 125</u>						
CITY <u>Wichita</u>						
STATE <u>KS</u>						
ZIP CODE <u>67226</u>						
			TRUCK #	DRIVER	TRUCK #	DRIVER
			<u>463</u>	<u>Shannon</u>		
			<u>479</u>	<u>John</u>		

*C&G
RIS 2*

JOB TYPE <u>surface</u>	HOLE SIZE <u>12 1/4"</u>	HOLE DEPTH <u>261'</u>	CASING SIZE & WEIGHT <u>8 5/8"</u>
CASING DEPTH <u>261' KB.</u>	DRILL PIPE	TUBING	OTHER
SLURRY WEIGHT <u>15"</u>	SLURRY VOL <u>40 Bbl</u>	WATER gal/sk <u>6.5</u>	CEMENT LEFT in CASING <u>20'</u>
DISPLACEMENT <u>15 1/4 Bbl</u>	DISPLACEMENT PSI	MIX PSI	RATE

REMARKS: Safety meeting: Rig up to 8 5/8" casing. Break circulation w/ 10 Bbl fresh water. Mixed 165 sacks class 'A' cement w/ 37% cement, 27% sealer, 1/4" flocculant @ 15" hole. Displace w/ 15 1/4 Bbl fresh water. Shut casing in w/ good cement returns to surface = 15 Bbl slurry to pit. Job complete. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
5406	150	MILEAGE	3.65	547.50
11045	165 sacks	class 'A' cement	13.50	2227.50
1102	465*	37% cement	.25	348.75
1118A	310"	27% sealer	.17	52.70
1107	40"	1/4" flocculant	2.10	84.00
5407A	7.35	tax-mileage bulk tax	1.20	1395.00
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				Subtotal <u>5380.45</u>
				SALES TAX <u>170.91</u>
				ESTIMATED TOTAL <u>5551.36</u>

Ravin 3737

AUTHORIZATION Witnessed by Rick Carter

203352
TITLE Tool Pusher

DATE