

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM

4/20/09

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 + _____
Contact Person: Tom Denning
Phone: (785) 628-2593
CONTRACTOR: License # 5184
Name: Shields Oil Producers Inc.
Wellsite Geologist: Herb Deines
Purchaser: _____

RECEIVED
KANSAS CORPORATION COMMISSION
APR 14 2009
CONSERVATION DIVISION
WICHITA, KS

Designate Type of Completion:

- New Well Re-Entry Workover
 Oil SWD SLOW
 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.: _____
02/23/2009 03/02/2009 PA 3/02/09
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

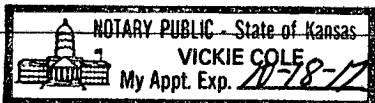
API No. 15 - 051-25,856-6000
Spot Description: _____
E/2 NW NE NE Sec. 28 Twp. 14 S. R. 16 East West
330' Feet from North / South Line of Section
760 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Ellis
Lease Name: Crathorne Well #: 1
Field Name: Dreiling
Producing Formation: dry hole
Elevation: Ground: 1856' Kelly Bushing: 1861'
Total Depth: 3500' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at: 220 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/ _____ sx cmt.

Drilling Fluid Management Plan PA AT II NCR
(Data must be collected from the Reserve Pit) 5-6-09
Chloride content: 79,000 ppm Fluid volume: 925 bbls
Dewatering method used: removed free-fluids: let evaporate
Location of fluid disposal if hauled offsite: _____
Operator Name: TDI, Inc.
Lease Name: Dreiling B License No.: 4787
Quarter SW/4 Sec. 221 Twp. 14S S. R. 16W East West
County: Ellis Docket No.: D-25,112

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 on 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: 4/9/09
Subscribed and sworn to before me this 9th day of April,
20 09
Notary Public: [Signature]
Date Commission Expires: _____



KCC Office Use ONLY

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

Operator Name: TDI, Inc Lease Name: Crathorne Well #: 1
 Sec. 28 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 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: Micro Radiation Guard	<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:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite Top</td> <td>948'</td> <td>+913'</td> </tr> <tr> <td>Anhydrite Base</td> <td>994'</td> <td>+867'</td> </tr> <tr> <td>Topeka</td> <td>2833'</td> <td>-972'</td> </tr> <tr> <td>Heebner</td> <td>3056'</td> <td>-1195'</td> </tr> <tr> <td>Lansing/ KC</td> <td>3104'</td> <td>-1243'</td> </tr> <tr> <td>Base KC</td> <td>3336'</td> <td>-1475'</td> </tr> <tr> <td>Arbuckle</td> <td>3352'</td> <td>-1639'</td> </tr> </table>	Name	Top	Datum	Anhydrite Top	948'	+913'	Anhydrite Base	994'	+867'	Topeka	2833'	-972'	Heebner	3056'	-1195'	Lansing/ KC	3104'	-1243'	Base KC	3336'	-1475'	Arbuckle	3352'	-1639'
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CASING RECORD <input type="checkbox"/> New <input checked="" 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"	20#	220'	common	150 sxs	2% gal 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
		<div style="border: 2px solid black; padding: 5px; transform: rotate(-2deg);"> RECEIVED KANSAS CORPORATION COMMISSION APR 14 2009 CONSERVATION DIVISION WICHITA KS </div>	

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 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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