

KCC
NOV 07 2005
CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED

Form ACO-1
September 1999
Form Must Be Typed

NOV 08 2005

KCC WICHITA
ORIGINAL

Operator: License # 3532
Name: CMX, Inc.
Address: 1551 N. Waterfront Parkway, Suite 150
City/State/Zip: Wichita, KS 67206
Purchaser: NA
Operator Contact Person: Douglas H. McGinness II
Phone: (316) 269-9052
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Ken LeBlanc

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____

7/22/05 7/28/05 7/28/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-22871-00-00
County: Barber
SW NE NW _____ Sec. 18 Twp. 31 S. R. 11 East West
990 feet from S (N) (circle one) Line of Section
1650 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Chain Ranch Well #: 3
Field Name: ILS
Producing Formation: NA
Elevation: Ground: 1591 Kelly Bushing: 1602
Total Depth: 4480 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 377 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 DA ATEL NH 6-13-08
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume 320 bbls
Dewatering method used Hauled off
Location of fluid disposal if hauled offsite: _____
Operator Name: Bemco
Lease Name: Mac SWD License No.: 32613
Quarter _____ Sec. 7 Twp. 32S S. R. 11 East West
County: Barber Docket No.: CD-78217

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: President Date: 11/7/05
Subscribed and sworn to before me this 7th day of November,
2005.
Notary Public: Donna L. May-Murray
Date Commission Expires: 2/7/08

DONNA L. MAY-MURRAY
Notary Public - State of Kansas
My Appt. Expires 2/7/08

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

CONFIDENTIAL

Side Two

KCC
NOV 07 2005

ORIGINAL

Operator Name: CMX, Inc. Lease Name: Chain Ranch Well #: 3

Sec. 18 Twp. 31 S. R. 11 East West County: Barber

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Oread LS	3495	-1893
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	3552	-1950
List All E. Logs Run:		Upper Doug. Snd	3598	-1996
		Bm Ls/Lansing	3742	-2140
		Hush Shale	4143	-2541
		Marmaton	4209	-2607
		Mississippi	4290	-2688
		Kinderhook Shale	4403	-2801

CDNL-DIL

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	377	60/40 Pozmix	250	2% gel, 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 <i>(Amount and Kind of Material Used)</i>	Depth

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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.			Producing Method			
			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other *(Specify)*

Production Interval _____

ALLIED CEMENTING CO., INC. 20793

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
MEDICINE Ledge

DATE <u>7-29-05</u>	SEC. <u>18</u>	TWP. <u>31 S</u>	RANGE <u>11 W</u>	CALLED OUT <u>4:00 pm</u>	ON LOCATION <u>5:30 pm</u>	JOB START <u>6:00 pm</u>	JOB FINISH <u>7:15 pm</u>
LEASE <u>MAIN RANCH</u>	WELL # <u>3</u>	LOCATION <u>160 & ISABEL RD., 5/2 N TO</u>			COUNTY <u>SARASOTA</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>DUKE SIGN, 1/2 5/4 W-N TO LOC.</u>				

CONTRACTOR DUKE ES
 TYPE OF JOB ROTARY PLUG
 HOLE SIZE 7 7/8" T.D. 600'
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 600'
 TOOL _____ DEPTH _____
 PRES. MAX 200 MINIMUM 50
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____

OWNER CMX INC.
 CEMENT
 AMOUNT ORDERED 160 SK 60:40:6

DISPLACEMENT FRESH WATER
 EQUIPMENT

PUMP TRUCK CEMENTER BILL M.
 # 368 HELPER DAVID F.
 BULK TRUCK
 # 364 DRIVER STEVE K.
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>96 A</u>	@	<u>8.70</u>	<u>835.20</u>
POZMIX	<u>64</u>	@	<u>4.70</u>	<u>300.80</u>
GEL	<u>8</u>	@	<u>14.00</u>	<u>112.00</u>
CHLORIDE	_____	@	_____	_____
ASC	_____	@	_____	_____

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HANDLING 168 @ 1.60 268.80
 MILEAGE 10 X 168 X .06 180.00
 min chg TOTAL 1696.80

REMARKS:

1st PLUG 600', LOAD HOLE, PUMP 50 SK 60:40:6, DISPLACE WITH FRESH WATER;
2nd PLUG 400', LOAD HOLE, PUMP 75 SK 60:40:6, DISPLACE WITH FRESH WATER;
3rd PLUG 40', LOAD HOLE, PUMP 10 SK 60:40:6, DISPLACE WITH FRESH WATER;
PLUG RAT HOLE WITH 15 SK 60:40:6;
PLUG MOUSEHOLE WITH 10 SK 60:40:6

SERVICE

DEPTH OF JOB	<u>600'</u>			
PUMP TRUCK CHARGE				<u>665.00</u>
EXTRA FOOTAGE	_____	@	_____	_____
MILEAGE	<u>10</u>	@	<u>5.00</u>	<u>50.00</u>
MANIFOLD	_____	@	_____	_____
	_____	@	_____	_____
	_____	@	_____	_____

CHARGE TO: CMX INC.
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL 715.00

PLUG & FLOAT EQUIPMENT

_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____
_____	@	_____	_____

TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE ~~715.00~~
 DISCOUNT ~~0.00~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

SIGNATURE [Signature]

JOE LUCAS FOR
 PRINTED NAME

ALLIED CEMENTING CO., INC. 16210

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: M.L.

DATE <u>7-23-05</u>	SEC. <u>18</u>	TWP. <u>35s</u>	RANGE <u>11w</u>	CALLED OUT <u>2:30 pm</u>	ON LOCATION <u>3:00 pm</u>	JOB START <u>6:05 pm</u>	JOB FINISH <u>6:30 pm</u>
LEASE <u>main Ranch</u>		WELL # <u>3</u>		LOCATION <u>160 & Isabel Rd. 5 1/2 north</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>
OLD OR NEW (Circle one) <u>NEW</u>			Duke Sign 1 1/2 SW - W - N to location				

CONTRACTOR Duke #5

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D. 380'

CASING SIZE 8 5/8" 24.00 DEPTH 317'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 380'

TOOL _____ DEPTH _____

PRES. MAX 200 MINIMUM 50

MEAS. LINE _____ SHOE JOINT 15'

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 23 bbl fresh h₂O shot-in

OWNER Cmx, Inc.

CEMENT

AMOUNT ORDERED 250 sq 60:40:2 + 3% cc

COMMON	<u>150 A</u>	@	<u>8.70</u>	<u>1305.00</u>
POZMIX	<u>100</u>	@	<u>4.70</u>	<u>470.00</u>
GEL	<u>4</u>	@	<u>14.00</u>	<u>56.00</u>
CHLORIDE	<u>8</u>	@	<u>38.00</u>	<u>304.00</u>
ASC		@		

EQUIPMENT

PUMP TRUCK # 368 CEMENTER Mike Rucker

365 HELPER Dave Lelio

BULK TRUCK # 364 DRIVER Michael Cox

BULK TRUCK # _____ DRIVER _____

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KCC WICHITA

HANDLING	<u>262</u>	@	<u>1.60</u>	<u>419.20</u>
MILEAGE	<u>10 x 262 x .06</u>			<u>180.00</u>
			Min chg	TOTAL <u>2734.20</u>

REMARKS:

5:50 pm Pipe on bottom break, 6:05 Start
Cement: 250 sq 60:40:2 + 3% cc @ 14.8 weight
200 psi, 6:20 pm Stop pumps Release Rubber
Req Start Disp. 4 1/2 bbl min. 200 psi, 6:30 pm
@ 23 bbl fresh h₂O Disp. Stop pumps leave
15' Cement in casing as shoe. Shot-in.
200 psi on casing. Cement did circulate.
Circ. 75 sq to pit.

SERVICE

DEPTH OF JOB	<u>317'</u>			
PUMP TRUCK CHARGE	<u>0-300'</u>			<u>670.00</u>
EXTRA FOOTAGE	<u>77'</u>	@	<u>.55</u>	<u>42.35</u>
MILEAGE	<u>10</u>	@	<u>5.00</u>	<u>50.00</u>
head Rental		@	<u>75.00</u>	<u>75.00</u>

CHARGE TO: Cmx, Inc.

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 837.35

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

PLUG & FLOAT EQUIPMENT

MANIFOLD	@		
<u>8 5/8" Rubber Plug</u>	@	<u>100.00</u>	<u>100.00</u>
<u>8 5/8" Basket</u>	@	<u>180.00</u>	<u>180.00</u>
	@		
	@		

TOTAL 280.00

TAX _____

TOTAL CHARGE ~~837.35~~

DISCOUNT ~~0.00~~ IF PAID IN 30 DAYS

SIGNATURE [Signature]

Joe Livingston
PRINTED NAME

Thank you!