

ORIGINAL

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

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 32218
Name: TDR Construction, Inc.
Address: 1207 N. 1st Street East
City/State/Zip: Louisburg, KS. 66053
Purchaser: CMT
Operator Contact Person: Lori Driskell
Phone: (913) 406-4236
Contractor: Name: Town Oilfield Service, Inc.
License: 33715
Wellsite Geologist: _____
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. _____
4/11/08 4/16/08 5/15/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 059-25262-0000
County: Franklin
C SW NE SW Sec. 32 Twp. 15 S. R. 21 East West
1970 feet from S / N (circle one) Line of Section
3300 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Duffy Well #: W-8
Field Name: Paola-Rantoul
Producing Formation: Squirrel
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 802' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 21' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 21'
feet depth to surface w/ 3 _____ sx cmt.
AKZ - Hg - 7/9/08

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 1500-3000 ppm Fluid volume 80 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: Lori Driskell
Title: Agent Date: 5/15/08
Subscribed and sworn to before me this 15th day of May
20 08
Notary Public: J. Helms
Date Commission Expires: 5-21-2011

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

JESSICA M. HELMS
Notary Public - State of Kansas
My Appt. Exp. 5-21-2011

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 16 2008
CONSERVATION DIVISION
WICHITA, KS

Operator Name: TDR Construction, Inc. Lease Name: Duffy Well #: W-8
 Sec. 32 Twp. 15 S. R. 21 East West County: Franklin

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 type="checkbox"/> Yes <input checked="" 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:	<input checked="" 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	6 1/4"			21'	Portland	3	
Completion	5 5/8"	2 7/8"		773'	Portland	103	50/50 POZ

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
2	731.0-733.5 11 Perfs		
2	735.0-748.0 54 Perfs		

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 <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 *(If vented, Submit ACO-18.)*

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

Production Interval _____

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KANSAS CORPORATION COMMISSION

MAY 16 2008

CONSERVATION DIVISION
WICHITA, KS



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 221418

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Invoice Date: 04/23/2008 Terms: 0/30,n/30

Page 1

TDR CONSTRUCTION
1207 N. FIRST STREET
LOUISBURG KS 66053
() -

DUFFY W-8
32-15-21
15999
04/17/08

Part Number	Description	Qty	Unit Price	Total
1124	50/50 POZ CEMENT MIX	103.00	9.3000	957.90
1118B	PREMIUM GEL / BENTONITE	295.00	.1600	47.20
1111	GRANULATED SALT (50 #)	290.00	.3100	89.90
1110A	KOL SEAL (50# BAG)	580.00	.4000	232.00
1107A	PHENOSEAL (M) 40# BAG)	58.00	1.0900	63.22
4402	2 1/2" RUBBER PLUG	1.00	21.0000	21.00

Description	Hours	Unit Price	Total
237 MIN. BULK DELIVERY	1.00	300.00	300.00
368 CEMENT PUMP	1.00	875.00	875.00
368 EQUIPMENT MILEAGE (ONE WAY)	20.00	3.45	69.00

RECEIVED
KANSAS CORPORATION COMMISSION

MAY 16 2008

CONSERVATION DIVISION
WICHITA, KS

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Parts: 1411.22 Freight: .00 Tax: 95.97 AR 2751.19
Labor: .00 Misc: .00 Total: 2751.19
Sublt: .00 Supplies: .00 Change: .00
=====

Signed _____ Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

McALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 15999
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4/17/08	7841	DUFFY # W-8	32	15	21	FR
CUSTOMER TDR Construction			TRUCK # DRIVER TRUCK # DRIVER			
MAILING ADDRESS 1207 N 1st			506 Fred			
CITY STATE ZIP CODE Louisburg Ks 66053			368 Bill			
			237 Brett			

JOB TYPE Longstring HOLE SIZE 5 7/8 HOLE DEPTH 802 CASING SIZE & WEIGHT 2 7/8 EUE
 CASING DEPTH 725' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Plug
 DISPLACEMENT 4.5 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Check casing depth w/wire line. Mix & Pump 100# Gel
Flush. Mix & Pump 116 sks 50/50 Por Mix Cement
2% Gel 5% Salt 5# Kol Seal 1/2# Pheno seal per sack
Cement to surface. Flush pump & lines clean.
Displace 2 1/2" Rubber plug to casing TD w/ 4.5 BBL
Fresh water. Pressure to 750# PSI. Hold pressure
for 30 minute MIT. Shut in casing
Rig supplied water
KCC Rep: Levi Short Fred Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE <u>Cement Pump</u>	368	875.00
5406	20 mi	MILEAGE <u>Pump Truck</u>	368	69.00
5407	Minimum	<u>Ten Mileage</u>	237	300.00
5408				
1124	103 SKS	<u>50/50 Por Mix Cement</u>		957.20
1118B	295#	<u>Premium Gel</u>		47.20
1111	290#	<u>Granulated Salt</u>	89.25	122.85
1110A	580#	<u>Kol Seal</u>		232.00
1107A	58#	<u>Pheno Seal</u>		63.25
4402	1	<u>2 1/2" Rubber Plug</u>		21.00
RECEIVED KANSAS CORPORATION COMMISSION			Sub Total	2655.23
MAY 16 2008			Tax @ 6.8%	95.97
CONSERVATION DIVISION WICHITA, KS			SALES TAX ESTIMATED TOTAL	2751.19

AUTHORIZATION Jeff Town was here TITLE 221418 DATE _____