

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33233
 Name: Heartland Oil & Gas Corporation
 Address: 1610 Industrial Park Drive
 City/State/Zip: Paola, KS 66071
 Purchaser: _____
 Operator Contact Person: James Harmon
 Phone: (913) 294-1400
 Contractor: Name: Aztec Well Services, Inc.
 License: 33972
 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. _____

<u>7-11-07</u>	<u>07-12-07</u>	
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 121-28467-0000
 County: Miami
SE SE SE Sec. 04 Twp. 18 S. R. 24 East West
350 feet from (S) / N (circle one) Line of Section
425 feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: McFarlane Well #: 44-4
 Field Name: Jake
 Producing Formation: Coal / Shale
 Elevation: Ground: 978' Kelly Bushing: _____
 Total Depth: 620' Plug Back Total Depth: 598'
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 598'
 feet depth to surface w/ 91 sx cmt.

Drilling Fluid Management Plan AH IINH 7-22-08
 (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: Heartland Oil & Gas Corporation
 Lease Name: Peckman 32-7 WD License No.: 33233
 Quarter NE Sec. 7 Twp. 18 S. R. 24 East West
 County: Miami Docket No.: D28279

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: James D Harmon
 Title: Area Superintendent Date: 10-19-07
 Subscribed and sworn to before me this 19 day of October
20 07
 Notary Public: Marcia Littell
 Date Commission Expires: 3/3/2010



KCC Office Use ONLY

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

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 OCT 22 2007
 CONSERVATION DIVISION
 WICHITA, KS

Operator Name: Heartland Oil & Gas Corporation Lease Name: McFarlane Well #: 44-4
 Sec. 04 Twp. 18 S. R. 24 East West County: Miami

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 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: Dual Induction Compensated Neutron/SSD	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 1/2"	8 5/8"	24	20'	Portland	7	
Production	7 7/8"	5 1/2"	15.5	598'	OWC	91	10# Kol-seal

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

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

TICKET NUMBER 15556
 LOCATION Ottawa KS
 FOREMAN Fred Maden

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7/14/07	3576	Ma Farlane #44-4	4	18	24	M1

CUSTOMER		TRUCK #		DRIVER	
Heartland Oil & Gas.		306	368	Fred	Casey
MAILING ADDRESS		122	505-7106	Jason	Mark
1610 Industrial Park Drive					
CITY	STATE	ZIP CODE			
Paola	KS	66071			

JOB TYPE longstring HOLE SIZE 7 7/8 HOLE DEPTH 620 CASING SIZE & WEIGHT 5 1/2"
 CASING DEPTH 598 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 5 1/2 Plug
 DISPLACEMENT 14.6 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Wash down 70' 5 1/2" casing check casing depth w/ measuring line. Mix Pump #20 BBL Flush & 1 cal ESA-41 (soap) Mix Pump 9 BBL Tell tale dye ahead of 91 SKS OWC Cement w/ 10# Kol Seal per sack. Flush pump + lines clean. Displace 5 1/2" rubber plug to casing TD w/ KCL Treat water. Pressure to 500 PSI. Release pressure to set float valve. Check plug depth w/ measuring line.
Note: Mix Cement w/ Biocide Treated H₂O.
 Fred Maden

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1 of 2 wells	PUMP CHARGE Cement Pump	368	840.00
5406	1/2 of 40 mi	MILEAGE Pump Truck	368	66.00
5407A	1/2 of minimum	Ten Mileage	122	142.50
5501C	3 hrs	Transport. 505-7106		300.00
5609	1 hr	Pump Truck - Wash Casing	368	160.00
1120	82 SKS	owc cement	1262.00	1262.00
1110A	910 # 45 #	Kol Seal	345.00	1222.50
4406	1	5 1/2" Rubber Plug		56.00
1205	1/2 Gal	SuperSweet		13.00
1215	1/2 Gal	KCL Substitute		13.31
1238	1 Gal	ESA-41 (soap)		35.45
		Sub Total		3234.88
		Tax @ 6.55%		109.03
		SALES TAX		
		ESTIMATED TOTAL		3343.91

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AUTHORIZATION W# 214808

TITLE _____ DATE _____