

ORIGINAL

RECEIVED  
KANSAS CORPORATION COMMISSION

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

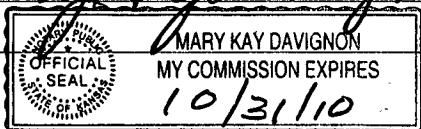
Operator: License # 33306  
Name: BLAKE EXPLORATION  
Address: BOX 150  
City/State/Zip: BOGUE KANSAS 67625  
Purchaser:  
Operator Contact Person: MIKE DAVIGNON  
Phone: (785) 421-2921  
Contractor: Name: BERENTZ DRLG.  
License: 5892  
Wellsite Geologist: MIKE DAVIGNON  
Designate Type of Completion:  
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.  
7-12-05 7-19-05  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 065230620000  
County: GRAHAM  
C N2 N2 S2 Sec. 5 Twp. 9S S. R. 21  East  West  
2375 feet from S / N (circle one) Line of Section  
2650 feet from E / N (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: STEPHEN Well #: 2  
Field Name:  
Producing Formation:  
Elevation: Ground: 2261 Kelly Bushing: 2266  
Total Depth: 3840 Plug Back Total Depth:  
Amount of Surface Pipe Set and Cemented at 218' 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 NH 7-16-08  
(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:  
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: *[Signature]*  
Title: *VP* Date: 8-8-07  
Subscribed and sworn to before me this 8 day of August  
20 07.  
Notary Public: *[Signature]*  
Date Commission Expires: *[Signature]*



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

Operator Name: BLAKE EXPLORATION Lease Name: STEPHEN Well #: 2  
 Sec. 5 Twp. 9S S. R. 21  East  West County: GRAHAM

**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  Yes  No  
 (Attach Additional Sheets)  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No  
 Electric Log Run  Yes  No  
 (Submit Copy)

List All E. Logs Run:

**R/A GUARD, MICRO, BY LOG-TECH**

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum  
 ANHYDRITE 1756  
 HEEBNER 3436  
 LANSING 3475  
 ARBUCKLE 3839

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 AUG 19 2007

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#	224'	COM	150	3%GEL,2%C.C.

CONSERVATION DIVISION  
 WICHITA, KS

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		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 Enthr.		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 \_\_\_\_\_

Production Interval  Other (Specify) \_\_\_\_\_

# ALLIED CEMENTING CO., INC.

21585

Federal Tax I.D.

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

*Spud 2:30 pm*  
*Drill 40221*

SERVICE POINT

*Russell*

DATE <i>7-12-05</i>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASE <i>Stephen</i>	WELL # <i>2</i>	LOCATION <i>Rolling Church of God 4.0</i>				COUNTY <i>Osborne</i>	STATE <i>Kansas</i>
OLD OR NEW (Circle one)		<i>2 1/2" 1/2"</i>					

CONTRACTOR *MTC*  
 TYPE OF JOB *Surface*  
 HOLE SIZE *12 1/2"* T.D. *221'*  
 CASING SIZE *8 3/4"* DEPTH *219'*  
 TUBING SIZE DEPTH  
 DRILL PIPE DEPTH  
 TOOL DEPTH  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG. *15'*  
 PERFS.  
 DISPLACEMENT *12 1/2 Bbl*  
 EQUIPMENT

OWNER  
 CEMENT  
 AMOUNT ORDERED *15000 lbs 3000*  
 COMMON @  
 POZMIX @  
 GEL @  
 CHLORIDE @  
 ASC @  
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PUMP TRUCK CEMENTER *Steve*  
 # *345* HELPER *Craig*  
 BULK TRUCK  
 # DRIVER *Doug*  
 BULK TRUCK  
 # DRIVER

HANDLING @  
 MILEAGE @

REMARKS:

*Cement did Circulate*  
*Thank You*

CHARGE TO: *Bloke Exploration*  
 STREET  
 CITY STATE ZIP

SERVICE  
 DEPTH OF JOB  
 PUMP TRUCK CHARGE  
 EXTRA FOOTAGE @  
 MILEAGE @  
 MANIFOLD @  
 TOTAL

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  
 DISCOUNT IF PAID IN 30 DAYS

SIGNATURE *[Signature]*

*[Signature]*  
 PRINTED NAME