

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 # 7160  
Name: Dave Wrestler  
Address: 1776 Georgia RD  
City/State/Zip: Humboldt/ KS/ 66748  
Purchaser: Plains marketing  
Operator Contact Person: Dave wrestler  
Phone: (620) 423-8795  
Contractor: Name: E.K. Energy LLC.  
License: 33977

Wellsite Geologist: none  
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. \_\_\_\_\_

9-13-07 9-14-07 9-14-07  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 001-29635-0000  
County: allen  
NE SE NW SW Sec. 1 Twp. 26 S. R. 19  East  West  
1650 feet from S / N (circle one) Line of Section  
2310 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Loren Korte Well #: 9

Field Name: Humboldt /Chanute  
Producing Formation: Cattelman  
Elevation: Ground: NA Kelly Bushing: NA  
Total Depth: 821 Plug Back Total Depth: NA  
Amount of Surface Pipe Set and Cemented at 25' Feet  
Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from TOP GROUND LEVEL 821  
feet depth to 821 0 w/ 87.5 sx cm.

Alt 2 - Dig - 9/21/08  
Drilling Fluid Management Plan  
(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: Dave Wrestler  
Title: Co-owner Date: 11-08-07

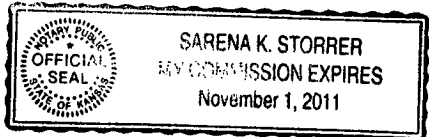
Subscribed and sworn to before me this 8th day of November  
2007.

Notary Public: Sarena K Storrer

Date Commission Expires: 11-1-2011

**KCC Office Use ONLY**

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



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Operator Name: Dave Wrestler Lease Name: Loren Korte Well #: 9  
 Sec. 1 Twp. 26 S. R. 19  East  West County: allen

**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)

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum  
**Cattleman** 793' TO 799' 6' OIL SAND

List All E. Logs Run:

**DRILLERS LOG**

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
<b>SURFACE</b>	12"	7"		25	PORTLAND	5	
<b>LONG STRING</b>	5/5/8	2 7/8		820	PORTLAND	87.5	

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
3	<b>SHOT 19 HOLES FROM 793 TO 799 6 FT</b>		

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. <b>9-29-07</b>	Producing Method				
	<input type="checkbox"/> Flowing <input checked="" 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
	1		5		34.0

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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**PAYLESS CONCRETE PRODUCTS, INC.**

802 N. INDUSTRIAL RD.  
P.O. BOX 664  
IOLA, KS 66749

Voice: 620-365-5588  
Fax:

**INVOICE**

Invoice Number: 19155,19201,19231  
Invoice Date: Sep 17, 2007  
Page: 1  
Duplicate

**Bill To:**  
CASH FOR C.O.D.'S  
802 N. INDUSTRIAL RD.  
IOLA, KS 66749

**Ship to:**  
DAVID OR RON WRESTLER  
1776 GEORGIA RD.  
2961 FLORIDA RD/ELSMORE 66732  
HUMBOLDT, KS 66748

<b>Customer ID</b>	<b>Customer PO</b>	<b>Payment Terms</b>	
CASH/C.O.D.	WRESTLER/#8,9,10	C.O.D.	
<b>Sales Rep ID</b>	<b>Shipping Method</b>	<b>Ship Date</b>	<b>Due Date</b>
	TRUCK		9/17/07

Quantity	Item	Description	Unit Price	Amount
87.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 9/13/07 TICKET#19155	6.60	577.50
1.25	TRUCKING	TRUCKING CHARGE 9/13/07 TICKET#19155	45.00	56.25
87.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 9/14/07 TICKET#19201	6.60	577.50
1.25	TRUCKING #9	TRUCKING CHARGE 9/14/07 TICKET#19201	45.00	56.25
87.50	CEMENT/WATER	CEMENT & WATER PER BAG MIX 9/17/07 TICKET#19231	6.60	577.50
1.25	TRUCKING	TRUCKING CHARGE TICKET#19231	45.00	56.25
<b>Subtotal</b>				1,901.25
<b>Sales Tax</b>				119.79
<b>Total Invoice Amount</b>				2,021.04
<b>Payment/Credit Applied</b>				
<b>TOTAL</b>				2,021.04

Check/Credit Memo No:

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