

Amended

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

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

Operator: License # 33019
Name: Rosewood Resources, Inc.
Address: 2711 N. Haskell Ave., Suite 2800, LB 22
City/State/Zip: Dallas, TX 75201
Purchaser: _____
Operator Contact Person: Tom Roelfs
Phone: (970) 324-1686
Contractor: Name: Mann Drilling Company
License: n/a
Wellsite Geologist: Steven VonFeldt
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. _____
11/3/2006 11/17/2006 11/18/2006
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 181-20458-0100
County: Sherman
SW SW SW SW Sec. 13 Twp. 7 S. R. 39 East West
125 feet from (S) / N (circle one) Line of Section
125 feet from E / (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Manlove Well #: 14-13H
Field Name: Goodland
Producing Formation: Niobrara
Elevation: Ground: 3566' Kelly Bushing: 3579'
Total Depth: 3451' Plug Back Total Depth: 3272'
Amount of Surface Pipe Set and Cemented at 385' KB Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1094' Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AHINH 7-9-08
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 200 bbls
Dewatering method used Evaporation
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: Jannell Geuver
Title: Production Assist Date: 4-24-07
Subscribed and sworn to before me this 26 day of April
2007.
Notary Public: Kathy Roelfs
Date Commission Expires: 6-3-09

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
MAY 08 2007

NOTARY PUBLIC - State of Kansas
KATHY ROELFS
My Appt. Exp. 6-3-09

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Rosewood Resources, Inc. Lease Name: Manlove Well #: 14-13H
 Sec. 13 Twp. 7 S. R. 39 East West County: Sherman

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: GR	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Niobrara 999' KB 12
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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	9 1/2"	7"	17#	385'	type 1	100	
Intermediate	n/a	n/a	n/a	n/a	n/a	n/a	n/a
Production	6 1/8"	4 1/2"	10.5#	3272'	type 1	50	

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
4	3199' to 3214'	Frac w/35,509gals of Mavfoam & 50,180#	
		16/30 Brady sand	

TUBING RECORD Size Set At Packer At none	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 1/11/2007	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. n/a	Gas Mcf 35	Water Bbls. n/a	Gas-Oil Ratio	Gravity
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.)
 Other (Specify) _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 08 2007
CONSERVATION DIVISION
WICHITA, KS