

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 # 33639
Name: Ullum Charles o. DBA ULLUM OIL
Address: 9333 S.E. TURKEY CREEK RD.
City/State/Zip: LEON, KS. 67074
Purchaser: _____
Operator Contact Person: CHARLES O. ULLUM
Phone: (316)-745-3316
Contractor: Name: GULICK DRILLING CO.
License: 32854
Wellsite Geologist: THOMAS E. BLAIR
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. _____
3-28-07 4-1-07
Spud Date or Date Reached TD Completion Date or Recompletion Date
per oper - KCC-Dlg

API No. 15 015-23729-0000
County: BUTLER, KS.
SE-NW-NE Sec 24 Twp. 27 S. R. 5 East West
4469 feet from (S) N (circle one) Line of Section
1382 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: ULLUM Well #: 24-02
Field Name: WILDCAT
Producing Formation: DRY
Elevation: Ground: 1375 Kelly Bushing: 1383
Total Depth: 2800 Plug Back Total Depth: 2800
Amount of Surface Pipe Set and Cemented at 280 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 ACTI NH 7-9-08
(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: Charles O. Ullum
Title: OPERATOR Date: 5-4-07
Subscribed and sworn to before me this 4th day of May,
2007
Notary Public: Christy L. Turner
Date Commission Expires: 2-20-2008

CHRISTY L. TURNER
Notary Public - State of Kansas
My Appt. Expires 2-20-2008

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received **RECEIVED**
 UIC Distribution **KANSAS CORPORATION COMMISSION**
MAY 09 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: CHARLER O. ULLUM Lease Name: ULLUM Well #: 24-02
 Sec. 24 Twp. 27 S. R. 5 East West County: BUTLER, KS.

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum Thomas E. BLAIR 2100 GEOLOGIST, S
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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	12-1/4	8-5/8		280	CLASS (A)	160	

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed 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 _____

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

TICKET NUMBER 17124
 LOCATION Eureka
 FOREMAN Steve Mead

TREATMENT REPORT & FIELD TICKET
 CEMENT

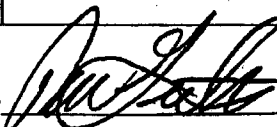
DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
3-29-07	8813	Ullum #24-2	24	27	SE	Butler	
CUSTOMER Ullum Charles O. dba Ullum Oil			Gulftek Drilling				
MAILING ADDRESS 9333 S.E. Turkey Creek Rd.							
CITY Leon		STATE Ks	ZIP CODE 67074	TRUCK #	DRIVER	TRUCK #	DRIVER
				485	Alan		
				439	Ternd		

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 297' CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 284 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 17 3/4 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up To 8 5/8 casing: Break Circulation with Fresh Water. Mix 160 sks Regular Class "A" Cement w/ 3% Cacl2 2% Gel & Floccle w/sk Displace with 17 3/4 bbls Fresh Water. Shut casing in Good cement Return To Surface. 7 bbls slurry. Job Complete Rig down

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54013	1	PUMP CHARGE	650.00	650.00
5406	15	MILEAGE	3.30	49.50
11045	160 sks	Regular Class "A" Cement	12.20	1952.00
1102	450 #	3% Cacl2	.67	301.50
1118A	300 #	2% Gel	.15	45.00
1107	50 #	1/2" polysk Floccle	1.90	95.00
5407		Tan mileage Bulk Truck	M/C	285.00
RECEIVED KANSAS CORPORATION COMMISSION				
MAY 09 2007				
CONSERVATION DIVISION WICHITA, KS				
			Sub Total	3378.00
			SALES TAX	126.91
			ESTIMATED TOTAL	3504.91

AUTHORIZATION  TITLE 212618 DATE _____

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

TICKET NUMBER 17020
 LOCATION El Dorado #80
 FOREMAN Jim Thomas

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
4-2-07	8813	Ullom 24-02				Butler
CUSTOMER Ullom Oil Co						
MAILING ADDRESS 9333 S.E Turkey Creek Rd						
CITY Leaw	STATE KS	ZIP CODE 67074				
JOB TYPE Plugging	HOLE SIZE 7 7/8	HOLE DEPTH	CASING SIZE & WEIGHT			
CASING DEPTH	DRILL PIPE 4 1/2 XH	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING			
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE			
REMARKS Safety meeting						

TRUCK #	DRIVER	TRUCK #	DRIVER
446	Jacob		
442	RON		

35 sks at 320 ft
 25 sks at 60 ft
 15 sks at RATCHLE

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405W	1	PUMP CHARGE	840.00	840.00
5406	13	MILEAGE	3.30	42.90
1131	75 sks	100/40 Poz-mix	9.80	735.00
1118A	300#	G&O	.15	45.00
5407	1	min Bulk Charge	285.00	285.00
		Subtotal		1947.90
		SALES TAX		41.35
		ESTIMATED TOTAL		1989.25

212807

RECEIVED

KANSAS CORPORATION COMMISSION DATE

AUTHORIZATION

TITLE

MAY 09 2007