

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32158  
Name: H & B Petroleum Corporation  
Address: PO Box 277  
City/State/Zip: Ellinwood, Kansas 67526-0277  
Purchaser: N/A  
Operator Contact Person: Al Hammersmith  
Phone: (620) 564-3002  
Contractor: Name: Xtreme Well Service, Inc.  
License: 33369  
Wellsite Geologist: N/A

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: Nadel & Gussman, Inc  
Well Name: Ouderkirk 4  
Original Comp. Date: 07-18-1949 Original Total Depth: 3768  
 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. \_\_\_\_\_  
05-20-2007      06-18-2007      06-18-2007  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date                Recompletion Date

API No. 15 - 163-01909-00-01  
County: Rooks  
SE NE NW Sec. 7 Twp. 10 S. R. 19  East  West  
4290 feet from S / N (circle one) Line of Section  
2970 feet from E / W (circle one) Line of Section

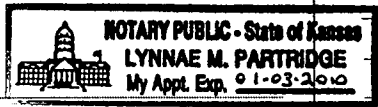
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Ouderkirk Well #: 4  
Field Name: Marcotte  
Producing Formation: Arbuckle  
Elevation: Ground: 2226 +/- Kelly Bushing: \_\_\_\_\_  
Total Depth: 3770 Plug Back Total Depth: 3770  
Amount of Surface Pipe Set and Cemented at 187 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 AND N/A 7-2-08  
(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: Vice President Date: 09/25/2007  
Subscribed and sworn to before me this 25th day of September,  
2007.  
Notary Public: Lynnae M. Partridge  
Date Commission Expires: January 3, 2010



**KCC Office Use ONLY**

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

SEP 28 2007

Operator Name: H & B Petroleum Corporation Lease Name: Ouderkirk Well #: 4  
 Sec. 7 Twp. 10 S. R. 19  East  West County: Rooks

**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:

Log Formation (Top), Depth and Datum  Sample

Name Top Datum

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

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		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

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 \_\_\_\_\_

U.S. GEOLOGICAL SURVEY  
 FEDERAL BUREAU OF GEOLOGY



# INVOICE

24 S. Lincoln Street  
 P.O. Box 31  
 Russell, KS 67665-2906  
 Voice: (785) 483-3887  
 Fax: (785) 483-5566

Invoice Number: 108801  
 Invoice Date: Jun 21, 2007  
 Page: 1

<b>Bill To:</b>
H & B Petroleum Corp. P. O. Box 277 Ellinwood, KS 67526

Federal Tax I.D.#:

Customer ID	Well Name# or Customer P.O.	Payment Terms	
H&B	Ouderkirk #4	Net 30 Days	
Sales Rep ID	Camp Location	Service Date	Due Date
	Russell	Jun 21, 2007	7/21/07

Quantity	Item	Description	Unit Price	Amount
123.00	MAT	Common	11.10	1,365.30
82.00	MAT	Pozmix	6.20	508.40
17.00	MAT	Gel	16.65	283.05
4.00	MAT	Hulls	25.50	102.00
243.00	SER	Handling	1.90	461.70
56.00	SER	Mileage 243 sx @.09 per sx per mi	21.87	1,224.72
1.00	SER	Pump Truck Charge	720.00	720.00
56.00	SER	Mileage	6.00	336.00

H & B PETROLEUM	
VENDOR	18848
ACCT #	4201 AFE
PROPERTY	180 (4)
DESCRIPTION	Cement to plug
APPROVAL	

**POSTED  
PAID**  
24295 07-17-07

ALL PRICES ARE NET, PAYABLE 30 DAYS FOLLOWING DATE OF INVOICE. 1 1/2% CHARGED THEREAFTER. IF ACCOUNT IS CURRENT, TAKE DISCOUNT OF

\$ 500.12

ONLY IF PAID ON OR BEFORE

Jul 21, 2007

Subtotal	5,001.17
Sales Tax	265.06
Total Invoice Amount	5,266.23
Payment/Credit Applied	
<b>TOTAL</b>	<b>5,266.23</b>

KANSAS CORPORATION COMMISSION  
 SEP 26 2007  
 CONSTRUCTION DIVISION  
 WICHITA, KS

COPY

# ALLIED CEMENTING CO., INC. 22079

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

SERVICE POINT:  
Russell

DATE <u>6-18-07</u>	SEC. <u>7</u>	TWP. <u>10</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START <u>1:30 p.m.</u>	JOB FINISH <u>4:00 p.m.</u>
LEASE <u>Ouderkirk</u>		WELL # <u>4</u>		LOCATION <u>Zurich 2w 25 1/2w Sinto</u>		COUNTY <u>Rooks</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR Extreme well service

TYPE OF JOB Old hole Plug

HOLE SIZE \_\_\_\_\_ T.D. \_\_\_\_\_

CASING SIZE 5 1/2 DEPTH \_\_\_\_\_

TUBING SIZE 2 1/2 DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. \_\_\_\_\_

PERFS. \_\_\_\_\_

DISPLACEMENT \_\_\_\_\_

**EQUIPMENT**

PUMP TRUCK CEMENTER Craig

# 409 HELPER Adrian

BULK TRUCK

# 410 DRIVER Chuck

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

**REMARKS:**

1st Plug @ 3200 SDS 100# Hauls

2nd Plug @ 1775 130# 300# Hauls +

Cement Circulated!

Mix 25% Down casing + Tapped off.

Thanks

CHARGE TO: H+B

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

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.

SIGNATURE [Signature]

OWNER \_\_\_\_\_

CEMENT 205SX + USED 400# Hauls

AMOUNT ORDERED 225 60/40 100% Gel

500 Hauls

COMMON	<u>128</u>	@ <u>11.00</u>	<u>1365.30</u>
POZMIX	<u>88</u>	@ <u>6.00</u>	<u>508.40</u>
GEL	<u>17</u>	@ <u>16.65</u>	<u>283.05</u>
CHLORIDE	@		
ASC	@		
<u>Hauls 4</u>	@ <u>25.50</u>		<u>102.00</u>
	@		
	@		
	@		
	@		
	@		
	@		
HANDLING	<u>243</u>	@ <u>1.90</u>	<u>461.70</u>
MILEAGE	<u>97.54</u>	MILE	<u>1224.75</u>
TOTAL			<u>3945.75</u>

**SERVICE**

DEPTH OF JOB	_____		
PUMP TRUCK CHARGE			<u>720.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>56</u>	@ <u>6.00</u>	<u>336.00</u>
MANIFOLD	@		
	@		
	@		
TOTAL			<u>1056.00</u>

**PLUG & FLOAT EQUIPMENT**

_____	@		
_____	@		
_____	@		
_____	@		
_____	@		
TOTAL			_____

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

PRINTED NAME \_\_\_\_\_