

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

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 32851
 Name: L & G Petroleum Operating LLC
 Address: 1396 So. Dakota Rd
 City/State/Zip: Iola, KS 66749
 Purchaser: Coffeyville Resources
 Operator Contact Person: Randy Stanley
 Phone: (620) 365-7435
 Contractor: Name: NA
 License: _____
 Wellsite Geologist: _____
 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: Carmel Energy Inc.
 Well Name: West Riggs 30B
 Original Comp. Date: 6/6/85 Original Total Depth: 927.88
 _____ 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. _____
6-6-1985 _____ 6-6-1985
 Spud Date or _____ Date Reached TD _____ Completion Date or _____
 Recompletion Date _____ Recompletion Date _____

API No. 15 - 001 27261 -0002
 County: Allen
 _____ NE Sec. 9 Twp. 24 S. R. 18 East West
4040 feet from (S) N (circle one) Line of Section
665 feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE (SE) NW SW
 Lease Name: West Riggs Well #: 30B
 Field Name: Carlyle
 Producing Formation: Bartlesville
 Elevation: Ground: 992.8 Kelly Bushing: _____
 Total Depth: 927.88 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 20 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.
W20-Dlg-7/1/09

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. 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: Randy Stanley
 Title: Assistant Manager Date: Nov. 9, 2005
 Subscribed and sworn to before me this 9th day of November,
 20 05.
 Notary Public: Leslie D. Littlepage
 Date Commission Expires: 2-15-09

KCC Office Use ONLY

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

NOTARY PUBLIC - State of Kansas
LESLIE D. LITTLEPAGE
 My Appt. Expires 2-15-09

RECEIVED
NOV 14 2005
KCC WICHITA

Operator Name: L & G Petroleum Operating LLC Lease Name: West Riggs Well #: 30B
 Sec. 9 Twp. 24 S. R. 18 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bartlesville	892-930	
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E. Logs Run:				

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	10.75	8 5/8	28#	20 ft	A	7	
Production Casing	6.75	4 1/2	9.5#	891.1 ft	A	136	2% gel

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
	Open Hole		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8" Guide 1"Prod	865'			
Date of First, Resumerd Production, SWD or Enhr.	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

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

RECEIVED
NOV 14 2005
KCC WICHITA

* CORRECTION

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 7989
Name Carmel Energy Inc.
Address R01 125
City/State/Zip Topeka, KS 66749

Purchaser ANOPP
Tulsa, OK

Operator Contact Person Bill Sailer
Phone 365-6049

Contractor: License # 7747
Name Western Exploration Drilling

Wellsite Geologist
Phone

Designate Type of Completion
 New Well Re-Entry Workover

Oil SMD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

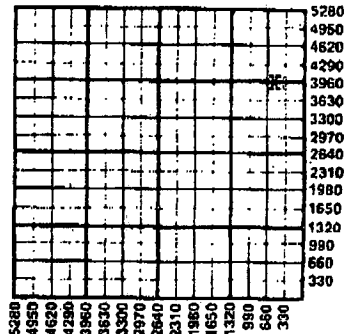
If OWO: old well info as follows:
Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable
5/24/85 Spud Date 5/26/85 Date Reached TD 6/6/85 Completion Date
927.88 Total Depth PBDT

Amount of Surface Pipe Set and Cemented at 2 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set
If alternate 2 completion, cement circulated from feet depth to W/SX amt

API NO. 154 001-27,261
County Allen
ARRC E/P NE Sec. 9 Twp. 24 Rge. 18 East West
4040 Ft North from Southeast Corner of Section
665 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)
Lease Name West Riggs Well # 50-B
Field Name Carlsle Pool Topeka
Producing Formation Bartlesville
Elevation: Ground 992.88 KB
Section Plat



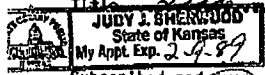
WATER SUPPLY INFORMATION
Disposition of Produced Water: Disposal Repressuring
Docket # GPM 781

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit #
 Groundwater (Well) Ft North from Southeast Corner
Ft West from Southeast Corner of Sec Twp Rge East West
 Surface Water (Stream, pond etc.) Ft North from Southeast Corner
Ft West from Southeast Corner Sec Twp Rge East West
 Other (explain) Drilled with city (purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 and 82-3-107 apply.
Information on 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 drillers time log shall be attached with this form. 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 William E. Sailer
Title Manager Date 7/22/85
Subscribed and sworn to before me this 22nd day of July 1985.
Notary Public Judy J. Sherwood
Date Commission Expires February 9, 1989



K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Drillers Time Log Received
Distribution
 KCC SMD/Rep NGPA
 KGS Plug Other (Specify)

Sec 9 Twp 24 Rge 18E

JUL 24 1985 Form ACO-1 (7-84)

RECEIVED
NOV 14 2005
KCC WICHITA

SIDE TWO

Operator Name Gamma Energy Inc Lease Name Vest Rig Well #. 30B

Sec. 9 Twp. 24 Rge. 18 East West County Allen

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name Top Bottom

N/A
20-1

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	10 3/4	8 5/8	28 #	20'	Class A	7	none
Production casing	6 3/4	4 1/2	9.5	891.1	class A	136	2% gel

PERFORATION RECORD			
Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	none	none	

TUBING RECORD			
Size	Set At	Packer at	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
23/8 EUE	924'	none	

Date of First Production	Producing Method
6/6/85	<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	Gas	Water	Gas-Oil Ratio	Gravity
	6.0	none	46.0	1	20.0
	Bbls	MCF	Bbls	CFPB	

RECEIVED
 NOV 14 2005
 KCC WICHITA

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify)
 Used on Lease Dually Completed
 Commingled