

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

Form ACO-1
 September 1999
 Form Must Be Typed

ORIGINAL

Operator: License # 30555
 Name: John Herrick
 Address: 3553 Oregon
 City/State/Zip: Wellsville, KS 66092
 Purchaser: _____
 Operator Contact Person: John Herrick
 Phone: (785) 242-6423
 Contractor: Name: Glaze Drilling
 License: 5885
 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., Cat.)
 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. E-27,807
 Spud Date or 3/27/05 3/29/05 3/30/05
 Recompletion Date Date Reached TD Completion Date or
 Recompletion Date

API No. 15 - 15 121 28076 0000
 County: Miami
SE NW NW - NE Sec. 30 Twp. 17 S. R. 22 East West
4860 feet from N (circle one) Line of Section
2020 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Brown Well #: 2A
 Field Name: Paola-Rantoul
 Producing Formation: Peru
 Elevation: Ground: n/a Kelly Bushing: n/a
 Total Depth: 370 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.
 Drilling Fluid Management Plan AH II NCR 8-5-08
 (Data must be collected from the Reserve Pit)
 Chloride content n/a ppm Fluid volume n/a 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.: _____

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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: Partner Date: 3/27/05
 Subscribed and sworn to before me this 24 day of March
2005
 Notary Public: [Signature]
 Date Commission Expires: 6/17/08

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes No Date: _____
OFFICIAL SEAL
DIANE R. LAWSON
 NOTARY PUBLIC - OKLAHOMA
 COMMISSION # 00008660
 EXPIRES JUNE 17, 2008
 OKLAHOMA COUNTY
 v em. 6/6/05
 v em. Prod. has Orig. ACO-1



ORIGINAL

Operator Name: John Herrick Lease Name: Brown Well #: 2A
 Sec. 30 Twp. 17 S. R. 22 East West County: Miami

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:
 gamma ray/neutron

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Name	Top	Datum
Base of Hertha		192
Peru Sand		328-350
TD		370

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CASING RECORD <input type="checkbox"/> New <input checked="" 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		6 1/4		20 ft.	portland	6	
production		2 3/8		368	50/50 poz	70	

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
2	328-348.5	spot acid on perforations and breakdown with 500 gallons of acid	

TUBING RECORD Size _____ Set At _____ Packer At _____ Liner Run Yes No

Waiting On KCC Approval For Injection

Date of First, Resumed Production, SWD or Enhr. _____ Producing Method Flowing Pumping Gas Lift 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 Open Hole Perf. Dually Comp. Commingled _____

(If vented, Submit ACO-16.) Other (Specify) _____

CONSOLIDATED OIL WELL SERVICES, INC.
 211-W. 14TH STREET, CHANUTE, KS 66720
 620.431-9210 OR 800-467-8676

TICKET NUMBER 2040
 LOCATION Ottawa KS
 FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-29-05	3554	Brown # A-2	30	17	22	mi
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
John Herrick			372	F. Mader		
MAILING ADDRESS			368	C. Kennedy		
3553 Oregon Rd			370	J. Polidoro		
CITY	STATE	ZIP CODE	144	R. Fisher		
Ottawa	KS	66067				

JOB TYPE long shoe HOLE SIZE 6" HOLE DEPTH 365' CASING SIZE & WEIGHT 2 3/8" EUS
 CASING DEPTH 368' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2" Rubber Plug
 DISPLACEMENT 1.4 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish Circulation, Mix & Pump 1 sk Premium Gel
Flush. Mix & Pump. 70 SKS 50/50 Poz mix 2% Gel
Connect to surface Flush pump clean. Displace 2"
Rubber Plug to casing TD w/ 1.4 BBL Fresh H2O.
Pressure to 600+ PSI. Hold pressure for 30 minutes
For MIT. Shut in Casing
Fred Mader

KCC Rep. Frank Guittoye.
 Glove Drilling.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		7.50 ⁰⁰
5406	25	MILEAGE		61.35
5407	minimum	Ton Mileage		235 ⁰⁰
5502C	2hrs	80 BBL Vac Truck		160 ⁰⁰
1124	68 SK	50/50 Poz mix Cement		503.30
1118	3 SKS	Premium Gel	12.95 ⁰⁰	39 ⁰⁰
4401	1	2" Rubber Plug		16 ⁰⁰
				36.56
				35.17
				6.3%
SALES TAX				
ESTIMATED TOTAL				1277.62

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AUTHORIZATION _____ TITLE 196325 DATE 1801.21

328-478

ORIGINAL

R. S. Glaze Drilling

22139 S. VICTORY RD.
SPRING HILL, K.S. 66083
PHONE: (913) 592-2033
FAX: (913) 592-2448
E-Mail: glazedrilling@aol

Brown-2A

15-121-28076-00-00

20	Surface	20
24	Shale	44
4	Lime	48
42	Shale	90
14	Lime	104
16	Shale	120
6	Lime	126
2	Shale	128
13	Lime	141
10	Shale	151
23	Lime	174
3	Shale	177
1	Blk. Slate	178
5	Lime	183
2	Shale	185
5	Lime	190
24	Shale	214
6	Sandy Lime	220
74	Shale	294
1	Lime	295
4	Hard Shaley Sand	299
23	Sandy Shale	322
2	Red Bed	324
2	Shale	326
2	Sand	328
1	Sandy Lime	329
8	Some Limey Sand	337
5	Sandy Lime	342
3	Lt. Brn. Sand	345
4	Sandy Lime	349

2	Shale	351
7	Lime	358
2	Shale	360
4	Lime	364
6	Shale	370

T.D.

Hertha

Good Show Oil

Some Show

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