

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33190
 Name: Noble Energy, Inc.
 Address: 1625 Broadway, Suite 2200
 City/State/Zip: Denver, CO 80202
 Purchaser: Kinder Morgan
 Operator Contact Person: Jennifer Barnett
 Phone: (303) 228-4235
 Contractor: Name: Excell Services Inc., Wray, CO
 License: 8273
 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., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: n/a
 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. _____

<u>2/21/2007</u>	<u>3/19/2007</u>	<u>3/19/2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - ~~023-20764-0000~~ She 023-20746-0000 *Corrected 4/19/08 mco*
 County: Cheyenne
 NW NW Sec. 15 Twp. 3 S. R. 42 East West
660' feet from S (N) (circle one) Line of Section
660' feet from E (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE (NW) SW
 Lease Name: Rueb Farm Well #: 11-15
 Field Name: Cherry Creek
 Producing Formation: Niobrara
 Elevation: Ground: 3697' Kelly Bushing: 3706'
 Total Depth: 1800' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 311', cmt w/ 100 sx Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from n/a
 feet depth to _____ sx cmt.
PA-Dlg-9/18/08
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 (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: Jennifer Barnett
 Title: Permit Representative Date: 4/3/08
 Subscribed and sworn to before me this 3rd day of April
 20 08
 Notary Public: [Signature]
 Date Commission Expires: August 6, 2011

KCC Office Use ONLY

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

RECEIVED
 KANSAS CORPORATION COMMISSION
APR 04 2008

Operator Name: Noble Energy, Inc. Lease Name: Rueb Farm Well #: 11-15
 Sec. 15 Twp. 3 S. R. 42 East West County: Cheyenne

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)

Log Formation (Top), Depth and Datum Sample
 Name Niobrara Top 1560' Datum

List All E. Logs Run:

**Triple Combo (Density, Neutron, Induction),
 CBL/CCL/GR**

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	9-7/8"	7"	17#	311'	Type III	100 sx	3% CaCl, .25% Flo-cele

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 checked="" type="checkbox"/> Plug Off Zone	Surface-1600'	50/50 POZ	80 sx	2% CaCl, .25% Flo-cele

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
n/a	n/a	n/a	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr. n/a due to P&A well Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	0	0	0	

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

BISON OIL WELL CEMENTING, INC.

P.O. Box 2223 • Gillette, WY 82717-2223
 Phone: 307-682-9044
 Fax: 307-682-9056
 E-mail: bisonoil@vcn.com



TREATMENT REPORT

5734
 LOCATION Cheyenne KS
 FOREMAN Stanley P. Stimpson
Connie

DATE 3-19-07	CUSTOMER ACCT # Rural Farm	WELL NAME 11-15	QTR/QTR	SECTION	TWP	RGE	COUNTY Cheyenne	FORMATION
CHARGE TO EXCELL				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR EXCELL Mfg/IT				
STATE				DISTANCE TO LOCATION				
ZIP CODE				TIME LEFT LOCATION				
TIME ARRIVED ON LOCATION 9:00				WELL DATA				

HOLE SIZE	6 1/4
TOTAL DEPTH	1800
CASING SIZE	
CASING DEPTH	
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	2 1/2" - 340' - 60'
TUBING DEPTH	
TUBING WEIGHT	5.793#
TUBING CONDITION	good
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> ERAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

	PRESSURE LIMITATIONS	
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB **MRU SAFETY MEETING 8:45 - 9:15**
m-p 90 sacks RL15 II Yield 113 Pw 15.2 II
Displace 57 BBLS H2O washup 10:15 R's down

JOB SUMMARY

DESCRIPTION OF JOB EVENTS	TIME
1) m-p 35 sacks cement	10:20
2) m-p 35 sacks cement	11:07
3) m-p 10 sacks cement	11:29
Displace 20 BBLS H2O	10:23
Displace 70 BBLS H2O	11:10
Displace 27 BBLS H2O	11:30

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE X PRESSURE	

AUTHORIZATION TO PROCEED

TITLE _____ KANSAS CORPORATION COMMISSIONER

APR 04 2008
 3-19-07

BISON OIL WELL CEMENTING, INC.

600 17th Street, Suite 2800 South
 Denver, Colorado 80202
 Phone: 307-682-9044
 Fax: 307-682-9056
 E-mail: bisonoil2@comcast.net



TREATMENT REPORT

5628

LOCATION WEST ST FRANCIS
 FOREMAN FRANCIS

DATE 2-22-07	CUSTOMER ACCT # RUEB FARMS	WELL NAME 11-15	QTR/QTR	SECTION	TWP	RGE	COUNTY Cherokee	FORMATION
CHARGE TO EXCEL				OWNER SAME				
MAILING ADDRESS				OPERATOR WEAL				
CITY				CONTRACTOR GROSCH				
STATE				DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION 6:00				TIME LEFT LOCATION 7:10				

WELL DATA	
HOLE SIZE	2 7/8
TOTAL DEPTH	30'
CASING SIZE	7
CASING DEPTH	300
CASING WEIGHT	17
CASING CONDITION	Good
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input checked="" type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB SABE, Rgop circ well
M+P 100 S/KS @ 15.2 16 , DISPLACE 11.9 bbls

JOB SUMMARY

DESCRIPTION OF JOB EVENTS
 6:20 SABE
 6:35 M+P CNT
 6:45 DISPLACE
 6:50 SHUT IN WELL

RECEIVED
 KANSAS CORPORATION COMMISSION

APR 04 2008

CONSERVATION DIVISION
 WICHITA, KS

4 bbls T-P.T

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED

TITLE

DATE

2-22-07

BISON OIL WELL CEMENTING, INC.

P.O. Box 2223 • Gillette, WY 82717-2223
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 Fax: 307-682-9056
 E-mail: bisonoil@vcn.com



5739

LOCATION CHEYANE KS
 FOREMAN CHARLY P. STIMPSON
WONNIE

TREATMENT REPORT

DATE <u>3-19-07</u>	CUSTOMER ACCT # <u>Rued Farm</u>	WELL NAME <u>11-15</u>	QTR/QTR	SECTION	TWP	RGE	COUNTY <u>CHEYANE</u>	FORMATION
CHARGE TO <u>EXCELL</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR <u>EXCELL RIG IT</u>				
STATE				DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION <u>9:30</u>				TIME LEFT LOCATION				

HOLE SIZE <u>6 1/4</u>	TOTAL DEPTH <u>1800</u>
CASING SIZE	CASING DEPTH
CASING WEIGHT	CASING CONDITION
TUBING SIZE <u>2 1/2"</u>	TUBING DEPTH <u>1600' - 340' - 60'</u>
TUBING WEIGHT <u>5.793#</u>	TUBING CONDITION <u>GOOD</u>
PACKER DEPTH	PERFORATIONS
SHOTS/FT	OPEN HOLE
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB MTRU SAFETY MEETING EST-CIP
m-p 90 sks BLIND YIELD 113 Pressure 15.2 TI
Displace 57 BB15H2O washup PIT R's down

JOB SUMMARY

DESCRIPTION OF JOB EVENTS	<u>MTRU (9:33)</u>	<u>SAFETY (10:00)</u>
1) m-p 35 sks cement (10:20)		Displace 20 BB15H2O (10:23)
2) m-p 35 sks cement (11:07)		Displace 70 BB15H2O (11:10)
3) MTP 10 sks cement (11:29)		Displace 27 BB15H2O (11:30)

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD: HHP = RATE X TIME / 1440	

AUTHORIZATION TO PROCEED

TITLE _____ DATE 3-19-07
 APR 04 2008

BISON OIL WELL CEMENTING, INC.

600 17th Street, Suite 2800 South
 Denver, Colorado 80202
 Phone: 307-682-9044
 Fax: 307-682-9056
 E-mail: bisonoil2@comcast.net



TREATMENT REPORT

5628

LOCATION West St Francis

FOREMAN Francis

DATE 2-22-07	CUSTOMER ACCT # 11-15	WELL NAME RUEB FARMS	QTR/QTR	SECTION	TWP	RGE	COUNTY Cherokee	FORMATION
CHARGE TO EXCEL				OWNER SAME				
MAILING ADDRESS				OPERATOR WEAL				
CITY				CONTRACTOR GROSCH				
STATE				DISTANCE TO LOCATION				
ZIP CODE				TIME LEFT LOCATION 7:10				
TIME ARRIVED ON LOCATION 6:00				WELL DATA				

HOLE SIZE 9 7/8
TOTAL DEPTH 301
CASING SIZE 7
CASING DEPTH 300
CASING WEIGHT 17
CASING CONDITION Good
TUBING SIZE
TUBING DEPTH
TUBING WEIGHT
TUBING CONDITION
PACKER DEPTH
PERFORATIONS
SHOTS/FT
OPEN HOLE
TREATMENT VIA

TYPE OF TREATMENT	
<input checked="" type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

	PRESSURE LIMITATIONS	
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB SASE, R 900 Circ well
M+P 100 SKS @ 15.2 16, DISPLACE 11.9 bbls

JOB SUMMARY

DESCRIPTION OF JOB EVENTS (6:20) SASE RECEIVED
KANSAS CORPORATION COMMISSION
 6:35 M+P CMT
 6:45 DISPLACE APR 04 2008
 6:50 SHUT IN WELL

4 bbls T-P.T CONSERVATION DIVISION
WICHITA, KS

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED

TITLE

DATE

2-22-07

BISON OIL WELL CEMENTING, INC.

P.O. Box 2223 • Gillette, WY 82717-2223
 Phone: 307-682-9044
 Fax: 307-682-9056
 E-mail: bisonoil@vcr.com



5734

LOCATION Cheyenne KS

TREATMENT REPORT

FOREMAN THOMAS B. STIMPSON
WONNIE

DATE <u>3-19-07</u>	CUSTOMER ACCT # <u>Rued Farm</u>	WELL NAME <u>11-15</u>	QTR/QTR	SECTION	TWP	RGE	COUNTY <u>CHEYANNE</u>	FORMATION
CHARGE TO <u>EXCELL</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR <u>EXCELL RIG/IT</u>				
STATE				DISTANCE TO LOCATION				
ZIP CODE				TIME LEFT LOCATION				
TIME ARRIVED ON LOCATION <u>9:00</u>				WELL DATA				

HOLE SIZE <u>6 1/4</u>
TOTAL DEPTH <u>1800</u>
CASING SIZE
CASING DEPTH
CASING WEIGHT
CASING CONDITION
TUBING SIZE <u>2 3/8" - 390' - 60'</u>
TUBING DEPTH
TUBING WEIGHT <u>5.79374</u>
TUBING CONDITION <u>GOOD</u>
PACKER DEPTH
PERFORATIONS
SHOTS/RT
OPEN HOLE
TREATMENT VIA

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input checked="" type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

	PRESSURE LIMITATIONS	
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

RECEIVED
KANSAS CORPORATION COMMISSION

INSTRUCTIONS PRIOR TO JOB MTRU SAFETY MEETING EST-CIR
m-p 50 sks BBIS H2O Yield 113 Pressure 15.2 II
Displace 57 BBIS H2O washup 10:15 R. S. down
 APR 04 2008
 CONSERVATION DIVISION
 WICHITA, KS

JOB SUMMARY

DESCRIPTION OF JOB EVENTS MTRU (9:33) SAFETY (10:00)
1) m-p 35 sks cement (10:20) Displace 20 BBIS H2O (10:23)
2) m-p 35 sks cement (11:07) Displace 70 BBIS H2O (11:10)
3) MTP 10 sks cement (11:29) Displace 27 BBIS H2O (11:30)

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD:HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED

TITLE _____ DATE 3-19-07

BISON OIL WELL CEMENTING, INC.

600 17th Street, Suite 2800 South
 Denver, Colorado 80202
 Phone: 307-682-9044
 Fax: 307-682-9056
 E-mail: bisonoil2@comcast.net



TREATMENT REPORT

5628
 LOCATION WEST ST FRANCIS
 FOREMAN FRANCIS

DATE <u>2-22-07</u>	CUSTOMER ACCT # <u>11-15</u>	WELL NAME <u>RUEB FARMS</u>	QTR/QTR	SECTION	TWP	RGE	COUNTY <u>CHANDLER</u>	FORMATION
CHARGE TO <u>EXCEL</u>				OWNER <u>SAME</u>				
MAILING ADDRESS				OPERATOR <u>WEAL</u>				
CITY				CONTRACTOR <u>GROSCH</u>				
STATE				DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION <u>6:00</u>				TIME LEFT LOCATION <u>7:10</u>				

WELL DATA	
HOLE SIZE	<u>9 7/8</u>
TOTAL DEPTH	<u>301</u>
CASING SIZE	<u>7</u>
CASING DEPTH	<u>300</u>
CASING WEIGHT	<u>17</u>
CASING CONDITION	<u>GOOD</u>
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input checked="" type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB SAFE, RIGUP CIRC WELL
M&P 100 SKS @ 15.2 16 , D.SPLAC 11.9 bbls

JOB SUMMARY

DESCRIPTION OF JOB EVENTS
6:20 15052
6:35 M&P CNT
6:45 DISPLAC
6:50 SHUT IN WELL

RECEIVED
 KANSAS CORPORATION COMMISSION
APR 04 2008
 CONSERVATION DIVISION
 WICHITA KS

4 bbls T-P.T.

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED

[Signature]

TITLE

DATE

2-22-07