

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 # 5146
Name: Rains & Williamson Oil Co., Inc.
Address: 220 W. Douglas, Suite 110
City/State/Zip: Wichita, KS 67202
Purchaser: _____
Operator Contact Person: Juanita Green
Phone: (316) 265-9686
Contractor: Name: Murfin Drilling Co., Inc.
License: 30606
Wellsite Geologist: James C. Musgrove

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. _____

3/6/07 3/13/07 3/13/07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-23276-0000
County: Graham
170' E & 160' S
SW-NW-NW Sec. 20 Twp. 10 S. R. 21 East West
1150 feet from S / (circle one) Line of Section
500 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Thomason-Maxfield Well #: 2-20
Field Name: Wheeler South

Producing Formation: _____
Elevation: Ground: 2315' Kelly Bushing: 2320'
Total Depth: 4000' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 223 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
(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.: _____

Handwritten: DH - Dig - 9/17/08

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: Juanita M. Green
Title: President Date: 4/19/07

Subscribed and sworn to before me this 19th day of April,
20 07.

Notary Public: Patricia A. Thome
Date Commission Expires: June 18, 2009

PATRICIA A. THOME
Notary Public - State of Kansas
My Appt. Expires 6-18-2009

KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION

APR 27 2007

CONSERVATION DIVISION
WICHITA, KS

<u>Formation</u>	<u>Log Depth</u>	<u>Sub-Sea Datum</u>
Anhydrite	1791	+529
Topeka	3344	-1024
Heebner	3551	-1231
Toronto	3574	-1254
Lansing	3590	-1270
Base Kansas City	3825	-1505
Conglomerate	3888	-1563
Reworked Arbuckle	3928	-1608
Rotary Total Depth	4003	-1683
Log Total Depth	4000	-1680

RECEIVED
KANSAS CORPORATION COMMISSION

APR 27 2007

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

33084

Federal Tax I.D.# /

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

SERVICE POINT:
Russell

DATE <u>3-6-07</u>	SEC. <u>20</u>	TWP. <u>10S</u>	RANGE <u>21W</u>	CALLED OUT	ON LOCATION <u>7:00pm</u>	JOB START <u>9:15am</u>	JOB FINISH <u>9:45pm</u>
LEASE <u>Thomasovz</u> <u>Maxfield</u>	WELL # <u>2-20</u>	LOCATION <u>Riga rd to Dead End 2w20</u>			COUNTY <u>Graham</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>				<u>Einto</u>			

CONTRACTOR Maxfield 8

TYPE OF JOB Surface Job

HOLE SIZE _____ T.D. 223

CASING SIZE 8-5/8 23# DEPTH 223

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 13 1/4 BL

EQUIPMENT _____

PUMP TRUCK CEMENTER Craig

409 HELPER Brian

BULK TRUCK

345 DRIVER Brancon

BULK TRUCK

_____ DRIVER _____

REMARKS:

Cement Circulated!

THANKS!

OWNER _____

CEMENT

AMOUNT ORDERED 150 com. 390cc 2% GEL

COMMON	<u>150</u>	@	<u>1.65</u>	<u>1597.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>5</u>	@	<u>46.40</u>	<u>233.00</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>158</u>	@	<u>1.90</u>	<u>300.20</u>
MILEAGE	<u>98</u>	@	<u>1.15/mile</u>	<u>853.20</u>
TOTAL				<u>3033.85</u>

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 815.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 60 @ 6.00 360.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1175.00

PLUG & FLOAT EQUIPMENT

1 8 5/8 Wooden Plug 65.00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 65.00

CHARGE TO: Rain & Williams

STREET _____

CITY _____ STATE _____ ZIP _____

MAR 12 2007

Approved by [Signature]

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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

LARRY PICKNER
PRINTED NAME
RECEIVED
KANSAS CORPORATION COMMISSION

APR 27 2007

ALLIED CEMENTING CO., INC.

33195

Federal Tax I.D.#

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

SERVICE POINT:

Russell

DATE <u>3-13-07</u>	SEC <u>20</u>	TWP. <u>10</u>	RANGE <u>21</u>	CALLED OUT	ON LOCATION <u>7:30 Am</u>	JOB START	JOB FINISH <u>11:30 Am</u>
LEASE <u>Thompson</u>	WELL # <u>2-20</u>	LOCATION <u>Ribg 12 N 30 2N</u>			COUNTY <u>Graham</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR MURFIN #P

TYPE OF JOB Plug

HOLE SIZE 7 7/8 T.D.

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 225# 60/40-6 1/4" Flt Seal

COMMON	<u>135</u>	@	<u>1065</u>	<u>1437 75</u>
POZMIX	<u>90</u>	@	<u>500</u>	<u>522 00</u>
GEL	<u>11</u>	@	<u>165</u>	<u>183 15</u>
CHLORIDE		@		
ASC		@		
FLOSEA	<u>56#</u>	@	<u>200</u>	<u>112 00</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>236</u>	@	<u>190</u>	<u>426 40</u>
MILEAGE	<u>94/54</u>	@	<u>MILE</u>	<u>1274 40</u>
TOTAL				<u>3977 70</u>

EQUIPMENT

PUMP TRUCK CEMENTER Bill

366 HELPER PAUL

BULK TRUCK

410 DRIVER Doug

BULK TRUCK

DRIVER

REMARKS:

1st Plug c 3910 w/ 25 sbv

2nd Plug c 1820 w/ 25 sbv

3rd Plug c 1015 w/ 100 sbv

4th Plug c 275 w/ 40 sbv

5th Plug c 40 w/ 10 sbv

1 Sak RH

2 Sak MH

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>955 00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>.60</u>	@	<u>6 00</u>
MANIFOLD		@	
		@	
		@	
TOTAL <u>1315 00</u>			

CHARGE TO: Rains & Williamson

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

<u>FJ Wood</u>	@		<u>60 00</u>
	@		
	@		
	@		
	@		
TOTAL <u>60 00</u>			

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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Larry Pickner

LARRY PICKNER RECEIVED
PRINTED NAME CORPORATION COMMISSION

APR 27 2007

CONSERVATION DIVISION
WICHITA, KS