

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30567
Name: T - J Resources
Address: P. O. Box 1330
City/State/Zip: Lawrence, KS 66044-1330
Purchaser: Maelaskey
Operator Contact Person: Jeff Hawes
Phone: (620) 343-3278
Contractor: Name: Rig 6
License: 30567
Wellsite Geologist: Bill Stout

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. _____

<u>9-26-06</u>	<u>10-2-06</u>	<u>10-20-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 015-23694-0000
County: Butler
NE SW SE _____ Sec. 22 Twp. 23 S. R. 4 East West
990 feet from N (circle one) Line of Section
1650 feet from W (circle one) Line of Section

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

Lease Name: Hagen Well #: 1
Field Name: Clifford

Producing Formation: Lansing
Elevation: Ground: 1410 Kelly Bushing: 1410

Total Depth: 2243 Plug Back Total Depth: 1900

Amount of Surface Pipe Set and Cemented at 212 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.
Alt I - Dlg - 9/17/08

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 300 ppm Fluid volume 500 bbls
Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name: T - J Resources

Lease Name: Hagen License No.: 30567

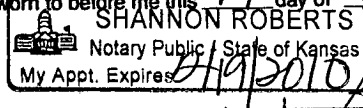
Quarter SE Sec. 22 Twp. 23 S. R. 4 East West
County: Butler Docket No.: _____

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: William Roberts
Title: _____ Date: 9-17-07

Subscribed and sworn to before me this 17 day of September, 2007.


Notary Public: Shannon Roberts

Date Commission Expires: 2/19/2010

KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 19 2007

Operator Name: T - J Resources Lease Name: Hagen Well #: 1
 Sec. 22 Twp. 23 S. R. 4 East West County: Butler

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Lansing	1809	-399
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	K C	2075	-665
List All E. Logs Run:				

Gamma Ray Neutron NA

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	12-1/4	8-5/8	24	212	Common	140	3% cc
Production	6-3/4	4-1/2		2243		200	

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
		Amount	Kind	
3	2208 - 10	60 g	Acid	2208-10
3	1818 - 1823		Natural	1818-23

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-3/8	2213	---		
Date of First, Resumerd Production, SWD or Enhr.			Producing Method			
11-1-06			<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	
	8		40			

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

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SEP 19 2007

CONSERVATION DIVISION
WICHITA, KS

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 10833
 LOCATION EUREKA
 FOREMAN KEVIN McCoy

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-2-06		Hagan #1	22	23S	4E	Butler

TRUCK #	DRIVER	TRUCK #	DRIVER
463	ALAN		
439	JERRID		
452 763	Jim		

CUSTOMER: T. J. Resources RIG 6
 DR19.
 MAILING ADDRESS: P.O. Box 1330
 STATE: KS ZIP CODE: 66044
 LAWRENCE

JOB TYPE: Longstring HOLE SIZE: 6 3/4 HOLE DEPTH: 2243 CASING SIZE & WEIGHT: 4 1/2 10.5# 25.2
 CASING DEPTH: 2245' DRILL PIPE: _____ TUBING: _____ OTHER: _____
 SLURRY WEIGHT: 13.4# SLURRY VOL: 45 BBL WATER gal/sk: 8.0 CEMENT LEFT in CASING: 0'
 DISPLACEMENT: 35.6 BBL DISPLACEMENT PSI: 600 PSI: 1100 Bump Plug RATE: _____

REMARKS: Safety Meeting: Rig up to 4 1/2 casing. Break circulation w/ 15 BBL fresh water. Mixed 150 SKS THICK Set Cement w/ 5" KOL-SEAL per/sk @ 13.4# per/gal, yield 1.69. Wash out pump & lines, shut down. Release Plug. Displace w/ 35.6 BBL fresh water. Final Pumping Pressure 600 PSI. Bump Plug to 1100 PSI. Wait 2 minutes. Release Pressure. Float Held. Shut casing in @ 0 PSI. Good circulation @ ALL times while cementing. Job Complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	50	MILEAGE	3.15	157.50
1126 A	150 SKS	THICK Set Cement	14.65	2197.50
1110 A	750 *	KOL-SEAL 5" per/sk	.36	270.00
5407 A	8.25 TONS	50 miles BULK TRUCK	1.05	433.12
5501 C	5 HRS	WATER Transport	98.00	490.00
1123	5500 GALS	City water	12.80 ^{per 1000}	70.40
4404	1	4 1/2 Top Rubber Plug	40.00	40.00
RECEIVED KANSAS CORPORATION COMMISSION				
DEC 04 2007				
CONSERVATION DIVISION WICHITA, KS				
		Sub Total		4458.52
		THANK YOU	5.3%	SALES TAX 136.63
				ESTIMATED TOTAL 4595.15

AUTHORIZATION Called By Rig 6 Dr19.

TITLE COPY

DATE _____

CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 10765
 LOCATION Europe
 FOREMAN Tray Strickler

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
9-26-06		Hagen #1				Butler	
CUSTOMER T.J. Resources			Rig 6	TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 1330				446	CLIFF		
CITY Lawrence				442	Jeff		
STATE KS				486	J.P.		
ZIP CODE 66044							

JOB TYPE 5/P HOLE SIZE 12 1/4" HOLE DEPTH 214' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 270' KR DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8° SLURRY VOL _____ WATER gal/sk 6.5° CEMENT LEFT in CASING 20'
 DISPLACEMENT 12.78bl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting. Rig up to 8 5/8" casing. Break circulation w/ 108bl water.
Pump 58bl Dye Water. Mix 130sk Class 'A' Cement w/ 27 Gel, 37 Cack
+ 1/2" Floccle Puff @ 14.8° Puff. Displace Cement w/ 12.78bl water.
shut casing in @ 200ACT Cement Fall Back. Wait 15mins. Top
hole off w/ 10sk Cement.

Job Complete.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	620.00	620.00
5406	50	MILEAGE	3.15	157.50
1104S	140sk	Class "A" Cement	11.25	1575.00
1118A	260"	Gel 27	.14	36.40
1102	400"	Cack 37	.64	256.00
1107		Floccle	1.80	35.00
5502C	Shut	808bl Vag. Truck	90.00	450.00
1123	3000gal	City Water	12.80	38.40
5407	6.58 Ton	Top-Mileage Bulk Truck	1.05	345.45
		Thank You!		
		Sub Total		3513.75
		SALES TAX 5.3%		102.86
		ESTIMATED TOTAL		3616.61

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 KANSAS CORPORATION COMMISSION
 DEC 04 2007
 CONSERVATION DIVISION
 WICHITA, KS

AUTHORIZATION called by Rig

TITLE **COPY**

DATE _____