

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4085
Name: Tom King dba King Energy Co.
Address: 2 Timber Dr.
City/State/Zip: Iola Ks. 66749
Purchaser: CMT
Operator Contact Person: Tom King
Phone: (620) 365 7750
Contractor: Name: L&S Well Service llc
License: 33374
Wellsite Geologist: _____

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. _____

1-10-06 1-11-06 2-1-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 133-26320-00-00
County: Neosho
SE SE NE NW Sec. 22 Twp. 27 S. R. 19 East West
1000 feet from S (N) (circle one) Line of Section
2450 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Stevens Well #: 5-05

Field Name: Humboldt-Chanute
Producing Formation: Bartlesville
Elevation: Ground: 950 Kelly Bushing: 954
Total Depth: 786 Plug Back Total Depth: 782
Amount of Surface Pipe Set and Cemented at 22 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 780
feet depth to surface w/ 106 sx cmt.

Drilling Fluid Management Plan DG 10-20-08
(Data must be collected from the Reserve Pit)
Chloride content 0 ppm Fluid volume 10 bbls
Dewatering method used evaporation

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: Tom King
Title: operator Date: 2-17-06
Subscribed and sworn to before me this 17th day of February
20 06.
Notary Public: Monica Fraker
Date Commission Expires: 4-8-06

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
MONICA FRAKER
My Appt. Exp. 4-8-06

Operator Name: Tom King dba King Energy Co. Lease Name: Stevens Well #: 5-05
 Sec. 22 Twp. 27 S. R. 19 East West County: Neosho

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

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Bartlesville 721-742

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	11	7	17	21	Common	8	
Casing	5 1/2	2 7/8	6.5	780	owc	106	

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
one	12 shots 723-734	Frac. with 50 sax & 110 bbl. gelled water	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	1 inch	720		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
2-02-06	<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
	6	0	4		28

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

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

Production Interval _____

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James D. Lorenz KCC Lic. #9313
 543A 22000 ROAD
 CHERRYVALE, KANSAS 67335-8515
 620-328-4433 OFFICE

TICKET NUMBER 20060116A
 LOCATION Neosho County
 FOREMAN J.L.

CEMENT TREATMENT REPORT

API# 15-133-26321-00-00

DATE <u>1-16-06</u>	CUSTOMER# <u>7001</u>	WELL NAME <u>5-06</u>	<u>STEVENS</u>
SECTION <u>22</u>	TOWNSHIP <u>27</u>	RANGE <u>19</u>	COUNTY <u>Neosho</u>
CUSTOMER <u>Tom King dba King Energy Co.</u>			
MAILING ADDRESS <u>2 Timber Drive</u>			
CITY <u>Fola</u>			
STATE <u>Kansas</u>		ZIP CODE <u>66749</u>	
TIME ARRIVED ON LOCATION			

HOLE	PIPE	ANNUAL VOLUME IN LINEAR FT./BL.	
6 3/4"	4 1/2"	40.5	
6 1/4"	4 1/2"	54.5	
6 1/4"	2 1/2"	33.5	
5 1/4"	2 1/2"	53.5	
5 1/4"	2"	47	
TUBING-LINEAR FT./BL.			
4 1/2"	9.5 lb.	61.7	
4 1/2"	10.5 lb.	63.1	
4 1/2"	11.6 lb.	64.5	
2 1/2"		170	
2"		250	

WELL DATA	
HOLE SIZE	<u>5 1/2"</u>
TOTAL DEPTH	<u>736'</u>
CASING SIZE	<u>2 1/2"</u>
CASING DEPTH	<u>775'</u>
OPEN HOLE	
PACKER DEPTH	
WIRE LINE	READING BEFORE
WIRE LINE	READING AFTER
TREATMENT VIA	

TYPE OF TREATMENT

- SURFACE PIPE
- PRODUCTION CASING
- SQUEEZE CEMENT
- PLUG AND ABANDON
- PLUG BACK
- MISP. PUMP
- WASH DOWN
- OTHER

INSTRUCTIONS PRIOR TO JOB

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DATE KCC WICHITA

AUTHORIZATION JK FEED

TITLE

HOOKED ONTO 2 1/2" CASING. ESTABLISHED CIRCULATION WITH 10 BARRELS OF WATER. RAN 3 Sx. GEL, 1/2 Sx. COTTONSEED HULLS, 1 Sx. METASILICATE AHEAD, THEN BLENDED 106 SACKS OF OWC CEMENT, THEN DROPPED RUBBER PLUG, THEN PUMPED 4.5 BARRELS OF WATER.

\$2800

- PLUG ON BOTTOM
- SHUT IN PRESSURE
- LOST CIRCULATION
- GOOD CEMENT RETURNS
- TOPPED OFF WELL WITH _____ SACKS

James D. Lorenz
 (SIGNATURE)