

CONFIDENTIAL

ORIGINAL

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

*KCC
man
8/13/08*

Form ACO-1
September 1999
Form Must Be Typed

7/30/09

Operator: License # 5192
Name: Shawmar Oil & Gas Company, Inc
Address: PO Box 9
City/State/Zip: Marion, KS 66861
Purchaser: N/a
Operator Contact Person: Beau J. Cloutier
Phone: (620) 382-2932
Contractor: Name: Shawmar Oil & Gas Company, Inc
License: 5192
Wellsite Geologist: none

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Exp, Coalbed, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____ **KCC**
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. _____
6/17/08 6/25/08 6/26/08
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 017-20901-00-00
County: Chase
NE SW SE SE Sec. 27 Twp. 18 S. R. 6 East West
414 feet from S / N (circle one) Line of Section
707 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: LIPS Well #: 4-27B
Field Name: Lipps D
Producing Formation: none
Elevation: Ground: 1473 Kelly Bushing: _____
Total Depth: 1359 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 201' 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 cm.

Drilling Fluid Management Plan *PA 10-27-08 NH*
(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: *[Signature]*
Title: President Date: 7/30/08
Subscribed and sworn to before me this 30th day of July
2008
Notary Public: *[Signature]* **AROL MAKOVES**
NOTARY PUBLIC
STATE OF KANSAS
Date Commission Expires: 3/1/2012
My Appt. Exp. 3/1/2012

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

RECEIVED
KANSAS CORPORATION COMMISSION
JUL 31 2008
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Shawmar Oil & Gas Company, Inc Lease Name: LIPS Well #: 4-27B
 Sec. 27 Twp. 18 S. R. 6 East West County: Chase

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 Top Datum

List All E. Logs Run:

Dual Induction; Compensated Density Sidewall
 Neutron Log

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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	11"	8 5/8		201'	Class A	100'	caclz;2% gel;phenoseal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
none	none	none	

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JUL 31 2008

TUBING RECORD		Size	Set At	Packer At	Liner Run	CONSERVATION DIVISION WICHITA, KS	
	none		N/a	none	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumerd Production, SWD or Enhr. dry	Producing Method			<input type="checkbox"/> Flowing <input 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		
	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) _____

Production Interval _____



CONSOLIDATED
Oil Well Services, LLC

ENTER

TICKET NUMBER 10605
LOCATION Eureka
FOREMAN Steve Reed

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-19-08	7665	Lipps 4-27B				Cherokee
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Shawnee Oil & Gas Co. Inc.			290	Alan		
MAILING ADDRESS			515	Terra		
P.O. Box 9						
CITY	STATE	ZIP CODE				
Macion	KS	66861				

JOB TYPE Surface HOLE SIZE 11" HOLE DEPTH 205 CASING SIZE & WEIGHT 2 3/8" 25"
 CASING DEPTH 201' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING 15'
 DISPLACEMENT 11 3/4" DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 1/2" casing. Pump 5 bbls Fresh water with Cotton seed hulls. Mix 100 sks Reg Cement with 2% Coc12, 2% Gel, 6 Pibonaseal. Displace with 11 3/4" bbls Fresh water. Didn't circulate.
 Aug 4-27 Original casing. Shift casing in.
Rig up to 1" pipe in old well. Pump 60 sks Reg Cement down 1" pipe. 100'.
Tap off surface pipe.
Pump 25 sks Cement down old surface hole.
Job Complete Rig down

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405	1	PUMP CHARGE	226.00	226.00
5406	50	MILEAGE	3.65	182.50
11045	285 sks Total	Class "A" Cement (New surface, old surface)	126.00	35970.00
1102	634	Coc12 3%	.75	475.50
1118A	420	Gel 2%	.17	71.40
1107A	80	Pibonaseal 1/2" per/sk	1.15	92.00
1106	100	Cotton Seed Hulls	.39	39.00
5407A	10.67 Tons	50 miles Bulk Truck	6.00	634.20
4106	F	8 1/2" Cement Basket	306.00	306.00
7274B-05 = 4732.20				
GL-73930 = 72704-05 = \$1084.26 for plugging 4-27 (cement)				
INV# 222809 06/08				
			Subtotal	5563.10
			SALES TAX 6.3%	253.36
			ESTIMATED	
			TOTAL	5816.46

Ravin 3737

222809
TITLE Cm. Rep

DATE _____

AUTHORIZATION Called by Benny



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

TICKET NUMBER 18710
LOCATION Eureka
FOREMAN Steve New

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-26-08	2665	Lipps 4-27B				Chase
CUSTOMER			TRUCK #			
Shawmar Oil & Gas Co. Inc.			DRIVER			
MAILING ADDRESS			TRUCK #			
P.O. Box 9			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE			TRUCK #			
Macian			DRIVER			
Ks			TRUCK #			
66861			DRIVER			

JOB TYPE PTA HOLE SIZE _____ HOLE DEPTH 252' CASING SIZE & WEIGHT _____
 CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to Drill pipe. Plug well 252' to surface.
Used 90 sks 60/40 Poz mix 4% Gel. Pull out Drill pipe. Top
Well off. Job complete. Rig down.

JUL 30 2008

KCC

Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405n	1	PUMP CHARGE	926.00	926.00
5406	50	MILEAGE	3.65	182.50
1131	90 SKS	60/40 Poz mix cement	11.35	1021.50
118A	200 ^g	Gel 4%	.17	51.00
5407		Tan Mileage Bulk Truck	m/c	315.00
RECEIVED				
KANSAS CORPORATION COMMISSION				
JUL 31 2008				
CONSERVATION DIVISION				
WICHITA, KS				
			Sub Total	2495.00
			SALES TAX 6.3%	67.56
			ESTIMATED TOTAL	2562.56

Revin 3737

223068

AUTHORIZATION Called by Benny

TITLE Co. Rep.

DATE _____

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