

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 # 31629
Name: Nash Oil & Gas Inc.
Address: P O Box 8747
City/State/Zip: Pratt, KS 67124
Purchaser: Oneok
Operator Contact Person: Jerry Nash
Phone: (620) 672-3800
Contractor: Name: Warren Drilling LLC
License: 33724
Wellsite Geologist: Kim B. Shoemaker
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: _____
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. _____
10/10/06 10/20/06 10/30/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 151222430000
County: Pratt
200' N C SW/4 Sec. 36 Twp. 26 S. R. 11 East West
1520 feet from (S) / N (circle one) Line of Section
1320 feet from E / (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Trinkle Well #: 1
Field Name: Haynesville East
Producing Formation: Viola
Elevation: Ground: 1770 Kelly Bushing: 1777
Total Depth: 4360 Plug Back Total Depth: 4360
Amount of Surface Pipe Set and Cemented at 473 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/ API-DIG - 10/17/08 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume 640 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Bullseye Oilfield Service Inc.
Lease Name: Clark SWD License No.: 31056
Quarter NW/4 Sec. 10 Twp. 26 S. R. 12 East West
County: Pratt Docket No.: D-21405

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: _____
Title: President Date: 2/6/07
Subscribed and sworn to before me this 6 day of February
2007
Notary Public: _____
Date Commission Expires: _____

LADAWN J. FERRELL
Notary Public - State of Kansas
My Appt. Expires 8-13-08

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
FEB 07 2007

Operator Name: Nash Oil & Gas Inc. Lease Name: Trinkle Well #: 1
 Sec. 36 Twp. 26 S. R. 11 East West County: Pratt

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

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	12-1/4	8-5/8	24#	473	60/40 Poz	420	3%CC 2% Gel
Production	7-7/8	5-1/2	15.5#	4365	60/40 Poz	125	

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
4 SPF	4290' - 4294'		

TUBING RECORD		Size <u>2-3/8</u>	Set At <u>4268</u>	Packer At <u>N/A</u>	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method <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

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 _____

RECEIVED
KANSAS CORPORATION COMMISSION
FEB 07 2007
 CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., INC.

24081

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

SERVICE POINT:
Medicine Lodge,

DATE <i>10-11-06</i>	SEC. <i>36</i>	TWP. <i>26S</i>	RANGE <i>11W</i>	CALLED OUT <i>2:30 AM.</i>	ON LOCATION <i>4:30 AM.</i>	JOB START <i>8:00 AM.</i>	JOB FINISH <i>8:40 AM.</i>
LEASE <i>Trunkline</i>		WELL # <i>1</i>	LOCATION <i>Preston 2S 4E</i>		COUNTY <i>Pratt</i>	STATE <i>KS</i>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<i>1/2 N E 1/4 T10</i>				

CONTRACTOR *Warren #2*

TYPE OF JOB *Surface*

HOLE SIZE *12 1/4* T.D. *480*

CASING SIZE *8 5/8* DEPTH *470*

TUBING SIZE *---* DEPTH *---*

DRILL PIPE *4 1/2* DEPTH *480*

TOOL *---* DEPTH *---*

PRES. MAX *300 PSI* MINIMUM *---*

MEAS. LINE *---* SHOE JOINT *15 FT*

CEMENT LEFT IN CSG. *15 FT*

PERFS. *---*

DISPLACEMENT *Fresh water 29 BBLS*

EQUIPMENT

OWNER *Nash Oil & Gas Co.*

CEMENT

AMOUNT ORDERED *400SX 60' 40' 2+*

3% CC

COMMON	<i>240 A</i>	@	<i>10.65</i>	<i>2556.00</i>
POZMIX	<i>160</i>	@	<i>5.80</i>	<i>928.00</i>
GEL	<i>7</i>	@	<i>16.65</i>	<i>116.55</i>
CHLORIDE	<i>13</i>	@	<i>46.60</i>	<i>605.80</i>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>420</i>	@	<i>1.90</i>	<i>798.00</i>
MILEAGE	<i>10 x 420 x .09</i>			<i>378.00</i>
				TOTAL <i>5382.35</i>

REMARKS:

*Pipe on bottom break line
Pump 400sx 60' 40' 2+ 3% CC
shut down Release Plug
Displace w/ 29 BBLS Fresh
water shut in cement
did line wash up Rig Down.*

SERVICE

DEPTH OF JOB	<i>470 FT</i>		
PUMP TRUCK CHARGE	<i>0-300'</i>		<i>815.00</i>
EXTRA FOOTAGE	<i>170'</i>	@	<i>.65</i> <i>110.50</i>
MILEAGE	<i>10</i>	@	<i>6.00</i> <i>60.00</i>
MANIFOLD	<i>Head Rent</i>	@	<i>100.00</i> <i>100.00</i>
		@	
		@	

TOTAL *1085.50*

CHARGE TO: *Nash Oil & Gas Co.*

STREET _____

CITY _____ STATE _____ ZIP _____

8 5/8" PLUG & FLOAT EQUIPMENT

<i>1-Centralizer</i>	@	<i>55.00</i>	<i>55.00</i>
<i>1-Rubber Plug</i>	@	<i>100.00</i>	<i>100.00</i>
	@		
	@		

ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING

TOTAL *155.00*

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]*

Mark Depman
PRINTED NAME