

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

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

KCC
Wax
6/23/08

* T-1 Aln
rec'd per app.
ck. 6/24/08
Bill Wax

Operator: License # 3473
Name: William T. Wax
Address: P. O. Box 276
City/State/Zip: McCune, KS 66753
Purchaser: _____
Operator Contact Person: Bill Wax
Phone: (620) 724-3400
Contractor: Name: William T. Wax
License: 3473

Wellsite Geologist: Bill Wax

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: n/a

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. _____

04/16/06	04/19/06	04/21/06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 037-21767-0000
County: Crawford
NE NE NE Sec. 30 Twp. 27 S. R. 24 East West
330 feet from S (N) (circle one) Line of Section
330 feet from (E) (circle one) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Johnson Well #: 30-1

Field Name: _____
Producing Formation: Riverton
Elevation: Ground: 1031 Kelly Bushing: _____
Total Depth: 551 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 20
feet depth to surface w/ 4 sx cm.

AKZ-Dlg-9/11/08

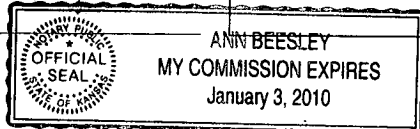
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

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: _____ Date: 6/10/08
Subscribed and sworn to before me this 10 day of JUNE,
20 08.
Notary Public: Ann Beesley
Date Commission Expires: 1-3-2010

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
JUN 19 2008



CONSERVATION DIVISION
WICHITA, KS

Operator Name: William T. Wax Lease Name: Johnson Well #: 30-1
 Sec. 30 Twp. 27 S. R. 24 East West County: Crawford

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: none	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Oswego/Ft. Scott lime</td> <td>130.5</td> <td></td> </tr> <tr> <td>Verdigris lime</td> <td>264</td> <td></td> </tr> <tr> <td>Weir-Pitt coal</td> <td>337</td> <td></td> </tr> <tr> <td>Riverton coal</td> <td>517</td> <td></td> </tr> </table>	Name	Top	Datum	Oswego/Ft. Scott lime	130.5		Verdigris lime	264		Weir-Pitt coal	337		Riverton coal	517	
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	9-7/8	6-5/8	15	20	common	4	1% CCL
production	5-7/8	2-7/8	6.5	549	common	60	1% CCL

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

RECEIVED
 KANSAS CORPORATION COMMISSION

JUN 19 2008

 CONSERVATION DIVISION
 WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. waiting on pipeline		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

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____



CRAWFORD COUNTY LUMBER INC.

308 EAST FOREST
GIRARD, KS 66743
(620) 724-8714



HOME OWNED - HOME OPERATED

INVOICE

DATE	INVOICE #	PAGE
04-01-2006	76415	1

S O L D T O	1
	CASH SALE

S H I P T O	

PC	PORTLAND CEMENT	670.00	7.00	4260.00															
ACCT BALANCE:		0.00	<div style="text-align: center;"> <p>RECEIVED</p> <p>KANSAS CORPORATION COMMISSION</p> <p>NOV 19 2006</p> <p>11 19 2006</p> <p>COMMUNICATIONS DIVISION</p> <p>STATE OF KANSAS</p> </div>																
1 1/2% PER MONTH (18% PER ANNUM) WILL BE ADDED TO PAST DUE INVOICES.		<table border="1"> <tr><td>SUB TOTAL</td><td>4260.00</td></tr> <tr><td>OTHER AMT</td><td></td></tr> <tr><td>SALES TAX</td><td>310.98</td></tr> <tr><td>SHIPPING</td><td></td></tr> <tr><td>TOTAL AMT</td><td></td></tr> <tr><td>TENDERED</td><td></td></tr> <tr><td>CHANGE</td><td></td></tr> <tr><td>BALANCE</td><td>4570.98</td></tr> </table>		SUB TOTAL	4260.00	OTHER AMT		SALES TAX	310.98	SHIPPING		TOTAL AMT		TENDERED		CHANGE		BALANCE	4570.98
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CHANGE																			
BALANCE	4570.98																		
SIGNATURE: _____		THANK YOU!																	