

Operator Name: Horseshoe Operating, Inc. Lease Name: Ross Well #: 6-6
 Sec. 6 Twp. 18 S. R. 39 East West County: Greeley

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Compensated Density Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	12-1/4	8-5/8	24#	536	Common	175	2% cc 1/4# flocele

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			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) _____

ALLIED CEMENTING CO., INC.

19660

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

SERVICE POINT:
Medicine Lodge

DATE <u>8/29/05</u>	SEC. <u>6</u>	TWP. <u>18s</u>	RANGE <u>39W</u>	CALLED OUT	ON LOCATION <u>3:15 PM</u>	JOB START <u>3:40 PM</u>	JOB FINISH <u>4:00 PM</u>
LEASE <u>Ross</u>	WELL # <u>6-6</u>	LOCATION <u>Tribune 4E 3N 1E 1/4 NW 1/4</u>	COUNTY <u>Crawley</u>	STATE <u>KS</u>			
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Cheyenne #5

TYPE OF JOB Cmt 8 3/4 Surface Csg

HOLE SIZE 12 1/4 T.D. 246

CASING SIZE 8 3/4 23" DEPTH 240

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 200 MINIMUM

MEAS. LINE SHOE JOINT 20

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 14 BBL

OWNER SAMP

CEMENT

AMOUNT ORDERED

175sk Com + 290cc 4" # Flo-seal

COMMON	<u>175sk A</u>	@	<u>10.00</u>	<u>1750.00</u>
POZMIX		@		
GEL		@		
CHLORIDE	<u>4 sks</u>	@	<u>38.00</u>	<u>152.00</u>
ASC		@		
<u>Flo-seal</u>	<u>44 #</u>	@	<u>1.70</u>	<u>74.80</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>181</u>	@	<u>1.60</u>	<u>289.60</u>
MILEAGE	<u>70 x 181 x .06</u>			<u>760.20</u>
				TOTAL <u>3026.60</u>

EQUIPMENT

PUMP TRUCK CEMENTER Kevin

372 HELPER Mike Cox

BULK TRUCK

353 DRIVER Jerry

BULK TRUCK

DRIVER

REMARKS:

Cmt 8 3/4 Surface Csg with 175sk Com + 290cc 4" # Flo-seal Displace 14 BBL Close in Csg Cement Did Circulate

SERVICE

DEPTH OF JOB	<u>240'</u>		
PUMP TRUCK CHARGE			<u>670.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>70 mi</u>	@	<u>5.00 350.00</u>
MANIFOLD		@	
<u>Head Rental</u>		@	<u>75.00 75.00</u>
		@	
TOTAL <u>1095.00</u>			

CHARGE TO: Horse shoe Operating

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	
TOTAL _____		

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.

ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING

SIGNATURE Hawk

TAX _____

TOTAL CHARGE ~~3026.60~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

PRINTED NAME