

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

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 32723
Name: See Oil Co.
Address: Box 97 126 W. Walnut
City/State/Zip: Stark, Kansas 66775-0097
Purchaser: CMT
Operator Contact Person: Charles E. See
Phone: (620) 754 3939
Contractor Name: Ensminger / Kimzey
License: 31708
Wellsite Geologist: C. See

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. _____

10/25/05 10/26/05 10/26/05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 037-21 736-00-00
County: Crawford
SW SE NW
S2 N2 S2 NW Sec. 2 Twp. 28 S. R. 23 East West
4175' feet from (S) N (circle one) Line of Section
4455' feet from (E) W (circle one) Line of Section
OP. Intent - KCC-Dlg
Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Burge Well #: S - 105
Field Name: Farlington
Producing Formation: Peru
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 212' Plug Back Total Depth: 207.9'
Amount of Surface Pipe Set and Cemented at 20.3' 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 0 w/ 38 sx cm.
Alt 2 - Dlg - 10/25/08

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: **RECEIVED**
Lease Name: JAN 25 2006 License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: KCC WICHITA Docket No.: _____

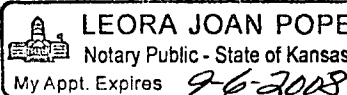
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Owner Date: 1-20-06
Subscribed and sworn to before me this 20th day of January,
2006.
Notary Public: [Signature]
Date Commission Expires: 9-6-2008

KCC Office Use ONLY

NO Letter of Confidentiality Received
If Denied, Yes Date: _____
_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution


LEORA JOAN POPE
Notary Public - State of Kansas
My Appt. Expires 9-6-2008

Operator Name: See Oil Co Lease Name: Burge Well #: S 105
 Sec. 2 Twp. 28 S. R. 23 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 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:

Gamma Ray
 Neutron

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		20.3'	Portland	5	
Casing	6 3/4	4 1/5		207.9'	OWC	38	

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
2	170.0 - 176.0'	RECEIVED JAN 25 2006 KCC WICHITA	
2	179.0 - 185.0		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		4 1/2	207.9	NA	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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 Bbla.	Gas Mcf	Water Bbla.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-1B.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval Other (Specify) _____

CONSOLIDATED OIL WELL SERVICES, INC.

211 W. 14TH STREET, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER

4958

LOCATION Oxiana

FOREMAN Alan Mader

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-26-05	7862	Burge # 3105	2	28	23	CR
CUSTOMER <u>see 011</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 97</u>			DRIVER		TRUCK #	
CITY <u>Stark</u>		STATE <u>KS</u>	ZIP CODE <u>66775</u>		DRIVER	
			<u>386</u>	<u>Abmad</u>		
			<u>368</u>	<u>Coston</u>		
			<u>195</u>	<u>Joe pol</u>		

JOB TYPE long string HOLE SIZE 6 3/4 HOLE DEPTH 212 CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 207 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 3.25 DISPLACEMENT PSI 400 MIX PSI _____ RATE 4 gpm

REMARKS: Established circulation. Mixed & pumped 2 sn gel followed by 38.5x DWC cement. Circulated cement to surface. Flashed pump clean. Pumped 1 1/2 rubber plug to TD of casing. Well held 400 PST 309 float. Closed valve.

Driller supplied water & plug

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	765.00	765.00
5406	10	MILEAGE on location	368	3680.00
5402	207	Casing footage	368	NIC
5407A	1	ton miles #195 (less than min. multiple well)	452.00	452.00
1118B	2	premium gel		13.26
1126	38	DWC		494.00
		Sub		1129.26

RECEIVED
JAN 25 2006

KCC WICHITA

6.3%

SALES TAX 31.96
ESTIMATED TOTAL \$1386.22

AUTHORIZATION _____

TITLE WO# 200622

DATE Alan Mader