

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5616
 Name: Calvin G. Noah
 Address: 329 N. Birch
 City/State/Zip: Valley Center, Kansas 67147
 Purchaser: _____
 Operator Contact Person: Joan Noah
 Phone: (316) 755-1032
 Contractor: Name: C&G Drilling, Inc.
 License: 32701
 Wellsite Geologist: Kitt Noah
 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: (Design approval pending - will complete SWDW)
 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. _____

<u>1-11-2006</u>	<u>1-17-2006</u>	<u>4-17-2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 049-22,435-00-00
 County: Elk
NE NE NW Sec. 25 Twp. 31 S. R. 10 East West
330 feet from S (circle one) Line of Section
2310 feet from E (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Noah Well #: 1
 Field Name: Key
 Producing Formation: _____
 Elevation: Ground: 1084 Kelly Bushing: 1091
 Total Depth: 2266 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 195 Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 2255
 feet depth to surface w/ 450 sx cmt.

Drilling Fluid Management Plan AH II NR
 (Data must be collected from the Reserve Pit) 11-3-08
 Chloride content 800 mg/l ppm Fluid volume 100 bbls
 Dewatering method used evaporation
 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: Calvin G. Noah
 Title: Agent Date: 5-11-06
 Subscribed and sworn to before me this 11th day of May,
2006.
 Notary Public: Michelle Gulick
 Date Commission Expires: 3-16-08



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

RECEIVED
 MAY 12 2006
 KCC WICHITA

Operator Name: Calvin G. Noah Lease Name: Noah Well #: 1
 Sec. 25 Twp. 31 S. R. 10 East West County: Elk

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Cornish: GR-N, Cement Bond Log	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;"><input checked="" type="checkbox"/> Log</td> <td style="width:60%;">Formation (Top), Depth and Datum</td> <td style="width:30%;">Sample</td> </tr> <tr> <td></td> <td>Name</td> <td>Datum</td> </tr> <tr> <td></td> <td>Drum</td> <td>1155 -64</td> </tr> <tr> <td></td> <td>BKC</td> <td>1415 -324</td> </tr> <tr> <td></td> <td>Oswego</td> <td>1647 -556</td> </tr> <tr> <td></td> <td>Mississippian</td> <td>1982 -891</td> </tr> <tr> <td></td> <td>Arbuckle</td> <td>2263 -1172</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	Sample		Name	Datum		Drum	1155 -64		BKC	1415 -324		Oswego	1647 -556		Mississippian	1982 -891		Arbuckle	2263 -1172
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CASING RECORD							
New				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"	23#	195	Class A	100 sx.	3%CaCl 2% Gel
Production	7 7/8"	4 1/2"	10.5#	2254	60/40 poz	450 sx.	6% Gel

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	

TUBING RECORD		Size	Set At	Packer At	Liner Run	
					Yes	No
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
			Flowing	Pumping	Gas Lift	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 Open Hole Other (Specify) Wait design approval SWDW

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

Production Interval _____

(If vented, Sumit ACO-18.)

ATED OIL WELL SERVICES, INC.

OX 884, CHANUTE, KS 66720

20-431-9210 OR 800-467-8676

TICKET NUMBER 08103

LOCATION Eureka

FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
1-12-06	5080	Noah #1	25	31	10	EIK
CUSTOMER			TRUCK #			
Calvin Noah			463			
MAILING ADDRESS			DRIVER			
329 N. Birch			Alan			
CITY	STATE	ZIP CODE	TRUCK #			
Valley Center	Ks	67147	479			
			DRIVER			

C+G
Dsgl.

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 197' CASING SIZE & WEIGHT 8 5/8"
 CASING DEPTH 195' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14 # SLURRY VOL 24 Bbl WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
 DISPLACEMENT 11.1 Bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting. Rig up to 8 5/8" casing. Break Circulation w/ 15 Bbl
Fresh water mixed 100 sks Regular Class A Cement w/ 3% Cacl₂, 2% Gel +
1/4# Floccle Pw/sk @ 14# Pw/gal. ~~Displaced~~ Displaced Cement w/ 11.1 Bbl water
shut down. Shut casing in. Good Cement to ~~Surface~~ Surface.

Job Complete Rigdown.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401S	1	PUMP CHARGE	620.00	620.00
5406	50	MILEAGE	3.15	157.50
1104	100 sks	Regular Class "A" Cement	10.25	1025.00
1102	282 #	Cacl ₂ 37%	.64	180.48
1115A	4 sks	Gel 2%	7.00	28.00
1107	1 sk	Floccle 1/4# Pw/sk	44.90	44.90
5407	4.7 Ton	Ton Mileage Bulk Truck	m/c	275.00
RECEIVED MAY 12 2006 Thank You! KCC WICHITA				
			Sub Total	2330.88
			6.3% SALES TAX	80.54
			ESTIMATED TOTAL	2411.42

200110

AUTHORIZATION Called by Rig TITLE _____ DATE _____

SOLIDATED OIL WELL SERVICES, INC.
 BOX 884, CHANUTE, KS 66720
 20-431-9210 OR 800-467-8676

TICKET NUMBER 08169
 LOCATION Eureka
 FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
1-17-06	5680	Noah #1				EIK	
CUSTOMER Calvin Noah		C+G Drb.		TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS 329 N. Birch				463	Alan		
CITY Valley Center				479	Calvin T		
STATE Ks	ZIP CODE 67147			440	Larry L		

JOB TYPE Logging HOLE SIZE 7 7/8" HOLE DEPTH 2258' CASING SIZE & WEIGHT 4 1/2"
 CASING DEPTH 2264 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8-13.8 SLURRY VOL 122.286l WATER gal/sk 7.8 CEMENT LEFT IN CASING 0'
 DISPLACEMENT 3686l DISPLACEMENT PSI 500 PSI 1000 Bump Plug. RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Break circulation w/ 1086l Fresh Water Mixed 225sks 60/40 Poz-mix w/ 6% Gel + 1/4" Flocele Perf/sk. @ 12.8 # Perf/sk. Tail in w/ 225 sks Class A Cement w/ 4% Gel + 1% Calc₂ + 1/4" Flocele @ 13.8 # Perf/sk. Wash out Pump + lines. Shut down. Released Plug. Displaced w/ 3686l water. 986l into Displacement. Lost Circulation. Never got it Back. Final Pump Pressure 500 PSI. Bump Plug to 1000 PSI. Wait 2mins. Released Pressure. Float Held. Had Cement Returns to Surface Before we lost Circulation.
Job Complete Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	50	MILEAGE	3.15	157.50
1131	225sks	60/40 Poz-Mix Cement	8.40	1890.00
1118A	23sks	Gel 6% } Lead	7.00	161.00
1107	2 sks	Flocele 1/4" Perf/sk	44.90	89.80
1104	225sks	Regular Class "A" Cement	10.25	2306.25
1118A	17 sks	Gel 4%	7.00	119.00
1102	212 #	Calcium 1%	.64	135.68
1107	2 sks	Flocele 1/4" Perf/sk	44.90	89.80
5407A	20.25 tons	Ton-Mileage Bulk Truck	1.05	1063.13
4404	1	4 1/2" Top Rubber Plug	40.00	40.00
4129	11	4 1/2" Centralizers	29.00	319.00
4103	2	4 1/2" Cement Baskets	135.00	270.00
4161	1	4 1/2" AFU Float Shoe	146.00	146.00
		Sub Total		7587.16
		Thank You!	6.3%	SALES TAX 350.00
		ESTIMATED TOTAL		7937.16

RECEIVED
 MAY 12 2006
 KCC WICHITA

AUTHORIZATION Witnessed by Calvin Noah TITLE owner DATE _____