

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 31488
Name: mark george
Address: 817 c street
City/State/Zip: leroy kansas 66857
Purchaser: maclaskey
Operator Contact Person: mark george
Phone: (620) 363 0250
Contractor: Name: little joe oil
License: 30638
Wellsite Geologist: _____

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. _____

7-12-2005 7-19-2005 7-19-2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 031-22097-00-00
County: coffey
ne nw nw nw Sec. 13 Twp. 23 S. R. 16 East West
185 feet from S (N) (circle one) Line of Section
185 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: graham Well #: 11

Field Name: leroy
Producing Formation: squirail
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 1002 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1000
feet depth to surface w/ 139 sacks sx.cmt.

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.: _____

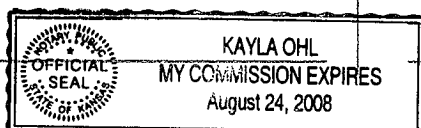
ATT 2-Dlg - 12/2/08

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: operator Date: 11/15/05
Subscribed and sworn to before me this 23rd day of November
2005

Notary Public: Kayla OHL



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

Operator Name: mark george Lease Name: graham Well #: 11
 Sec. 13 Twp. 23 S. R. 16 East West County: coffey

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)
 List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

RECEIVED
 NOV 28 2005
 KCC WICHITA

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	7 in	20	40	portland	25	
production	5 7/8	2 7/8	6	1002	owc	135	

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
2	946 to 954		
2	962 to 972		

TUBING RECORD	Size	Set At	Packer At	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

Production Interval Other (Specify)

UNITED OIL WELL SERVICES, INC.
 14TH STREET, CHANUTE, KS 66720
 431-9210 OR 800-467-8676

RECEIVED

NOV 28 2005

TICKET NUMBER 4098

LOCATION Ottawa KS

FOREMAN Fred Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

ORIGINAL

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-13-05	5347	Graham #11	13	23	16	CF
CUSTOMER Merry Investments			TRUCK #			
MAILING ADDRESS 700 Neosho			DRIVER			
CITY Burlington			TRUCK #			
STATE KS			DRIVER			
ZIP CODE 66839			TRUCK #			
			DRIVER			

JOB TYPE Long string HOLE SIZE 5 7/8 HOLE DEPTH 1010 CASING SIZE & WEIGHT 2 7/8 EOE
 CASING DEPTH 1002 0 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING 2 1/2 Rubber Plug
 DISPLACEMENT 5.8 BBL DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 BPM

REMARKS: Establish Circulation. Mix & Pump 2 SKS Premium Gel
 Flush Ahead mix & Pump 135 SKS OWC Cement, Cement to
 Surface. Flush Pump clean. Displace 2 1/2" Rubber Plug to
 Casing TD with 5.8 BBL Fresh water. Pressure to 600 #PSI
 Shot in Casing

Fred Mader

Nick Brown Drilling

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement Pump		765.00
5406	50 mi	MILEAGE Pump Truck		125.00
5407A	6.345 Ton	Ton Mileage		291.87
5502C	3 1/2 hrs	80 BBL Vac Truck		287.00
1126	135 SKS	OWC Cement		1755.00
1118	2 SKS	Premium Gel		26.50
1107	1.5 SKS	Flo Seal		64.13
4402	1	2 1/2 plug		17.00
		Tax @ 3%		98.72
		Total		3430.22
		SALES TAX		
		ESTIMATED TOTAL		

AUTHORIZATION _____

TITLE _____

198297

DATE _____