

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6766
Name: N & W Enterprises, Inc
Address: 1111 S Margrave
City/State/Zip: Fort Scott, KS 66701
Purchaser: Plains Marketing
Operator Contact Person: Tom Norris
Phone: (620) 223-6559
Contractor: Name: Hat Drilling LLC
License: 33734
Wellsite Geologist: _____

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. _____

<u>10/16/2006</u>	<u>10/27/2006</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

API No. 15 - ~~21855~~ 037-21855-00-00
County: Crawford
SW _SE_ _NE_ _NW_ Sec. 33 Twp. 28 S. R. 32 East West
4125 feet from (S) N (circle one) Line of Section
3135 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Walsh/Meyer Well #: Inj 20
Field Name: Walnut SE
Producing Formation: Bartlesville
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 425 Plug Back Total Depth: 422
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 422
feet depth to Top w/ 40 _____ sx cmt.
Alt 2 - Dlg - 12/02/08

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: Thomas L. Mann
Title: President Date: 11/21/06
Subscribed and sworn to before me this 21st day of November,
2006.
Notary Public: Virginia L. Norris
Date Commission Expires: 3-30-09

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

RECEIVED
NOV 27 2006
KCC WICHITA

3-30-09

Operator Name: N & W Enterprises, Inc Lease Name: Walsh/Meyer Well #: Inj 20
 Sec. 33 Twp. 28 S. R. 33 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <div style="font-family: cursive; font-size: 1.2em; color: blue;"> Gamma Ray Well Test </div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Bartiesville</td> <td>394</td> <td>404</td> </tr> </table>	Name	Top	Datum	Bartiesville	394	404
Name	Top	Datum					
Bartiesville	394	404					

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	8 5/8	7 lbs ft	20'	Portland #1	5	N/A
Production	5 5/8	2 7/8	4.7 lbs ft	422	Portland #1	40	N/A

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	394 to 404	10 sack sand frac	394-404

TUBING RECORD		Size 2 7/8	Set At 422	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. N/A			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. N/A	Gas Mcf N/A	Water Bbls. 20	Gas-Oil Ratio N/A	Gravity

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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NOV 27 2006

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N & W Enterprises Inc

Ticket #: 8

1111 S. Margrave
Fort Scott, KS 66701
620-223-6559

TREATMENT REPORT & FIELD TICKET CEMENT

DATE		LEASE NAME					
10/27/2006		Walsh/Meyer					
SECTION	TOWNSHIP	RANGE	COUNTY	SPOT LOCATION			WELL #
33	28	22	Crawford	SW-SE-NE-NW	4125 feet from South Line	3135 feet from East Line	Inj 20

Job Type: Long String Hole Size: 5 5/8 Hole Depth: 425 Casing Size & Weight: 2 7/8" 4.7 LBS

Casing Depth: 422' Drill Pipe: _____ Tubing: _____ Other: _____

Slurry Weight: _____ Slurry Vol: _____ Water gal/sk: _____ Cement Left in Casing: _____

Displacement: _____ Displacement PSI: _____ Mix PSI: _____ Rate: _____

Remarks: Established circulation, mixed 50# gel to flush hole, circulated cement to surface, flushed pump clean, pumped rubber plug to bottom shut in pressure 700 lbs.

Quantity: Description of Service

40	Sacks Portland #1 Cement
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RECEIVED
KANSAS CORPORATION COMMISSION
DEC 13 2007
CONSERVATION DIVISION
WICHITA, KS

Authorization:



Title:

For use/Operator

Date:

10/28/06