

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33453
Name: Stephen C. Jones
Address: 12 North Armstrong
City/State/Zip: Bixby, Ok. 74008
Purchaser: _____
Operator Contact Person: Steve Jones
Phone: (918) 366-3710
Contractor: Name: KanDrill
License: 32548
Wellsite Geologist: George Peterson

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. _____

3-27-06 3-31-06 4-25-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 031-22192-0000
County: Coffey
SW -nw- nw Sec. 28 Twp. 22 S. R. 14 East West
990 feet from S / (circle one) Line of Section
330 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: J. Birk Well #: 1A

Field Name: Wildvat
Producing Formation: Squirrel Sand
Elevation: Ground: 1185 Kelly Bushing: 1187

Total Depth: 1862 Plug Back Total Depth: 1854
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 1854
feet depth to surface w/ 260 sx cmt.

Alt 2-Dlg - 11-13-08

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: Stephen C. Jones
Title: President Date: 7-24-06
Subscribed and sworn to before me this 24 day of July
20 06
Notary Public: Schalet Sperson #02013205
Date Commission Expires: 9-19-06

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

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JUL 31 2006

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Operator Name: Stephen C. Jones Lease Name: J. Birk Well #: 1A
 Sec. 28 Twp. 22 S. R. 14 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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name <u>Mississippian</u>	Top <u>1780</u> Datum <u>log</u>
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		

List All E. Logs Run:
 Dual Compensated Porosity Log
 Dual Induction Log
 Gamma Ray Neutron Log

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 1/2	8 5/8	20#	40'	class A	30	cacl2 50#
Production	6 3/4	4 1/2	10.5#	1854'	60/40poz	150	floseal25#
					thickset	110	kolseal50#

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 <i>(Amount and Kind of Material Used)</i>	Depth
four	1433-1439	600gal. 15%HCL Acid	1433

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>1420</u>	Packer At <u>n/a</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed 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 <u>shut-in</u>	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas shut-in METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, Submit ACO-18.) Other (Specify)

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CONSOLIDATED OIL WELL SERVICES, INC.
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

JUL 31 2006

TICKET NUMBER 08510
 LOCATION EUREKA
 FOREMAN KEVIN McCoy

KCC WICHITA
 TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY	
3-23-06	1041	J. BIRK 1A	28	225	14E	COFFEY	
CUSTOMER <u>ARMOUR MANAGEMENT</u>			KAW-DRILL				
MAILING ADDRESS <u>12 NORTH ARMSTRONG</u>							
CITY <u>Bixby</u>		STATE <u>OK</u>	ZIP CODE <u>74008</u>	TRUCK #	DRIVER	TRUCK #	DRIVER
				<u>445</u>	<u>RICK L</u>		
				<u>442</u>	<u>JUSTIN</u>		

JOB TYPE SURFACE HOLE SIZE 12 1/4 HOLE DEPTH 40' CASING SIZE & WEIGHT 8 5/8 23* used
 CASING DEPTH 40' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.8* SLURRY VOL 6 BBL WATER gal/sk 5.2 CEMENT LEFT in CASING 10'
 DISPLACEMENT 1.9 BBL DISPLACEMENT PSI _____ MIX. PSI _____ RATE _____

REMARKS: Safety Meeting: Rig up to 8 5/8 casing. Break circulation w/ 5 BBL fresh water. Mixed 30 sks Regular Cement w/ 3% CaCl2, 1/4* floccle per/sk @ 14.8* per/gal. yield 1.18. Displace w/ 1.9 bbl fresh water. Shut casing in. Good cement returns to surface. Job complete. Rig down.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	620.00	620.00
5406	40	MILEAGE	3.15	126.00
11045	30 sks	Regular CLASS "A" Cement	11.25	337.50
1102	85 *	CaCl2 3%	.64 *	54.40
1107	8 *	Floccle 1/4 * per/sk	1.80 *	14.40
5407	1.4' TONS	Ton Mileage BULK TRUCK	Mic	150.00
			Sub Total	1302.30
			5.3% SALES TAX	21.53
			ESTIMATED TOTAL	1323.83

203919

AUTHORIZATION Witnessed By Downie

TITLE KAW-DRILL

DATE _____

RECEIVED

JUL 31 2006

TICKET NUMBER 08557

CONSOLIDATED OIL WELL SERVICES, INC.
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

KCC WICHITA

LOCATION Eureka

FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-30-06	1041	J. Burk 1-A	28	225	14E	Contoy
CUSTOMER <u>Armar Management</u>			Handrill			
MAILING ADDRESS <u>12 North Armstrong</u>						
CITY <u>Bixby</u>	STATE <u>OK</u>	ZIP CODE <u>74008</u>				
TRUCK #						
			DRIVER	TRUCK #	DRIVER	
			<u>463</u>	<u>Alan</u>		
			<u>442</u>	<u>Rick P.</u>	<u>T</u>	
			<u>441</u>	<u>Larry</u>	<u>L</u>	

JOB TYPE Longstrig HOLE SIZE 6 3/4 HOLE DEPTH 1862' CASING SIZE & WEIGHT 4 1/2"
CASING DEPTH 1854' DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT 12.8-13.2 SLURRY VOL 7686l WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
DISPLACEMENT 29.58bl DISPLACEMENT PSI 700 MIX PSI 1200 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Break circulation w/ 108bl Freshwater.
Mixed 150sks 60/40 Poz-Mix w/ 6% Gel, + 1/2" Pw/sk Floccle @ 12.8" Pw/sk.
Tail in w/ 110sks Thick Set Cement w/ 4" Pw/sk Kol-Seal @ 13.2" Pw/sk.
Wash out pump + lines. Shut down. Drop Plug. Displaced w/ 29.58bl Freshwater.
Final Pump Pressure. 700 PSI. Bump Plug to 1200 PSI. Wait 2mins.
Released Pressure. Float Held. Good Cement Returns to Surface = 158bl
Slurry to P.t.

Job Complete.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	40	MILEAGE	3.15	126.00
1131	150sks	60/40 Poz Mix	9.35	1402.50
118A	774 *	Gel 6% } Lead	.14 *	108.36
1107	75 **	Floccle 1/2" Pw/sk	1.80 **	135.00
1126A	110sks	Thick Set Cement	14.65	1611.50
1110A	440 *	Kol-Seal 4" Pw/sk	.36 *	158.40
5407A	12.5 Ton	Ton-Mileage Bulk Truck	1.05	525.00
4161	1	4 1/2" AFU Float Shoe	146.00	146.00
4103	2	4 1/2" Cement Baskets	135.00	270.00
4129	4	4 1/2" Centralizers	29.00	116.00
4404	1	4 1/2" Top Rubber Plug	40.00	40.00
<u>Thank You!</u>			Sub Total	5438.76
			5.8% SALES TAX	231.30
			ESTIMATED TOTAL	5670.06

204022

AUTHORIZATION Called by Donnie

TITLE _____

DATE _____