

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

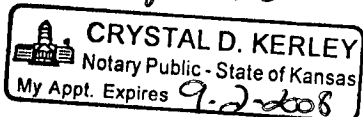
Operator: License # 9684
Name: M S Drilling
Address: P. O. Box 87
City/State/Zip: St. Paul, KS 66771
Purchaser: waiting on pipeline connection
Operator Contact Person: Mark Smith
Phone: (620) 449-2200
Contractor: Name: Company Tools
License: 9684
Wellsite Geologist: N/A
Designate Type of Completion:
____ 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: N/A
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. _____
5-23-06 5-25-06 5-27-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 037-21814-0000
County: Crawford
NE SE SW NE Sec. 21 Twp. 29 S. R. 24 East West
2145 feet from S / (circle one) Line of Section
1485 feet from (circle one) E / W Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Taylor Well #: 21-2
Field Name: Wildcat
Producing Formation: Weir-Pitt Coal
Elevation: Ground: 940 Kelly Bushing: _____
Total Depth: 203 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set N/A Feet
If Alternate II completion, cement circulated from 20
feet depth to Surface w/ 5 sx cmf.
Alt 2-Dlg-112600
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) N/A
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: N/A
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: Mark A. Smith
Title: operator Date: 10-18-06
Subscribed and sworn to before me this 18 day of October
2006
Notary Public: Crystal D. Kerley
Date Commission Expires: September 2, 2008


CRYSTAL D. KERLEY
Notary Public - State of Kansas
My Appt. Expires 9-2-2008

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

RECEIVED
OCT 23 2006
KCC WICHITA

Operator Name: M S Drilling Lease Name: Taylor Well #: 21-2
 Sec. 21 Twp. 29 S. R. 24 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: None	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Croweburg Shale</td> <td style="text-align: center;">43'</td> <td style="text-align: center;">+897'</td> </tr> <tr> <td>Tebo Shale</td> <td style="text-align: center;">121'</td> <td style="text-align: center;">+819'</td> </tr> <tr> <td>RTD</td> <td style="text-align: center;">203'</td> <td style="text-align: center;">+737'</td> </tr> </table>	Name	Top	Datum	Croweburg Shale	43'	+897'	Tebo Shale	121'	+819'	RTD	203'	+737'
Name	Top	Datum											
Croweburg Shale	43'	+897'											
Tebo Shale	121'	+819'											
RTD	203'	+737'											

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	9-7/8"	6-5/8"	15	20	Portland	5	1%CCL
Production	5-7/8"	2-3/8"	6.5	203	Portland	21	1%CCL

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

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 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 Other (Specify) _____

Production Interval _____

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OCT 23 2006

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INVOICE



CRAWFORD COUNTY LUMBER INC.

308 EAST FOREST
GIRARD, KS 66743
(820) 724-8714



HOME OWNED - HOME OPERATED

DATE	INVOICE #	PAGE
05-18-2006	76612	1

SOLD TO

CASH SALE

SHIPP TO

ITEM NO.	SKU NO.	ITEM/DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT
		PORTLAND CEMENT	450.00	7.50	3375.00

ACCT. BALANCE:	0.00	SUB TOTAL	3375.00
1% PER MONTH (18% PER ANNUM) WILL BE ADDED TO PAST DUE INVOICES.		OTHER AMT	
		SALES TAX	246.38
		SHIPPING	
		TOTAL AMT TENDERED	
		CHANGE	
		BALANCE	3621.38

SIGNATURE

THANK YOU!