

ORIGINAL

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

Operator: License # 32887
Name: Endeavor Energy Resources, LP
Address: PO Box 40
City/State/Zip: Delaware, OK 74027
Purchaser: NA
Operator Contact Person: Joe Driskill
Phone: (918) 467-3111
Contractor: Name: Well Refined Drilling
License: 33072
Wellsite Geologist: NA

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: NA

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. _____

7-15-08	7-17-08	NA
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 125-31655-0000
County: Montgomery
SE SE NW Sec. 13 Twp. 34 S. R. 16 East West
2310 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 SW
Lease Name: Campbell Well #: 13-3
Field Name: Coffeyville

Producing Formation: NA
Elevation: Ground: 726.7 Kelly Bushing: _____
Total Depth: 1005 Plug Back Total Depth: 998
Amount of Surface Pipe Set and Cemented at 66 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 998
feet depth to surface w/ 115 sx cmt.

Drilling Fluid Management Plan A17 II NW2
(Data must be collected from the Reserve Pit) 12-17-08
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: Joe Driskill
Title: Operations Superintendent Date: 10-31-08

Subscribed and sworn to before me this 31 day of October, 2008.

Notary Public: Stephanie LaKey
Date Commission Expires: April 18, 2009

STEPHANIE LAKEY
NOTARY PUBLIC-STATE OF OKLAHOMA
NOWATA COUNTY
MY COMMISSION EXPIRES APRIL 18, 2009
COMMISSION #05 063 715

KCC Office Use ONLY
 Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
NOV 03 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Endeavor Energy Resources, LP Lease Name: Campbell Well #: 13-3
 Sec. 13 Twp. 34 S. R. 16 East West County: Montgomery

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

Deep Induction Log
 Compensated Density / Neutron

CASING RECORD <input type="checkbox"/> New <input 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	12.250	8.625	21#	66'	Class A	50	
Production	6.750	4.5	10.5	998'	Class A	115	

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

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TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

CONSERVATION DIVISION
 WICHITA, KS

Date of First, Resumed Production, SWD or Enhr. Waiting on Pipeline 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 (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) Not complete

Production Interval _____



CONSOLIDATED
Oil Well Services, LLC

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

405/08

TICKET NUMBER 17873

LOCATION BARTLESVILLE, OK

FOREMAN Donnie Tate

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-18-08	2320	X-CAMPDELL 13-3				Montgomery, KS
CUSTOMER ENDEAVOR						
MAILING ADDRESS						
CITY			TRUCK #	DRIVER	TRUCK #	DRIVER
STATE			419	ANDY		
ZIP CODE			486	John F		
			402 T-35	Tom S		

JOB TYPE LS HOLE SIZE 6 3/4 HOLE DEPTH 1005' CASING SIZE & WEIGHT 4 1/2
 CASING DEPTH 998' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 14.0 SLURRY VOL 1.59 WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: ESTABLISH CIRC WITH H₂O, THEN RAN 35% GEL FOLLOWED BY 115% Newfield
Mix. WASHED OUT PUMP AND LINES, RELEASED PLUG. DISPLACING 16 BBL TO SET SHO
1200#, PLUG DOWN 11:30AM.

CMT TO SURFACE

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		925.00
5406	44	MILEAGE		160.60
5402	998	FOOTAGE		199.60
5407	min	BULK TRUCK		315.00
5501C	3 x HR	TRANSPORT		336.00
5621	1	PLUG CONTAINER		200.00
1104	115# / 10,810#	CLASS A cmt		1621.50
1107A	25# / 80#	PHENO		92.00
1118B	85# / 400#	GEL		68.00
1110A	235# / 1150#	KOL SEAL	RECEIVED KANSAS CORPORATION COMMISSION	483.00
1111	6# / 300#	SALT	NOV 03 2008	99.00
1123	4200 gallons	CITY WATER		58.80
4404	1	RUBBER PLUG	CONSERVATION DIVISION WICHITA, KS	45.00
			5.3%	SALES TAX #130.78
				ESTIMATED TOTAL #4731.28

THANK YOU

Flavin 3737

AUTHORIZATION

TITLE # 223861

DATE _____



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 17799

LOCATION Bothersville, OK

FOREMAN Kirk Sanders

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
7-15-08	2320	Campbell #13-3				McPherson
CUSTOMER			TRUCK #			
Edeavor			DRIVER			
MAILING ADDRESS			TRUCK #			
CITY			DRIVER			
STATE			TRUCK #			
ZIP CODE			DRIVER			
			398 John			
			538 Willie			
			454 780 Sean G.			

JOB TYPE Surf HOLE SIZE 12 1/4 HOLE DEPTH 67' CASING SIZE & WEIGHT 8 5/8
 CASING DEPTH 66' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15.6 SLURRY VOL 1.18 WATER gal/sk _____ CEMENT LEFT in CASING 20'
 DISPLACEMENT 2.9 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Too gull/len to establish circ, ran 50 yr of 4% calcium cement / disp
it shut in / washed up.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE (Surface)		725.00
5406	40	MILEAGE		146.00
5407	Mix	Bulk Trk		315.00
5402	66'	Footage		13.20
5502C	3 hrs	80 Vac		300.00
1104	50 sk / 4700 #	Cement (Class A)	8	705.00
1102	2 sk / 160 #	Calcium	9	120.00
1107A	2 sk / 80 #	Plenasol	9	92.00
1118B	3 sk / 150 #	Premium Gal	#	25.50
1123	60 gal / 2520 gal	City Water	#	35.28
RECEIVED KANSAS CORPORATION COMMISSION				
NOV 03 2008				
CONSERVATION DIVISION WICHITA, KS				
		5.3%	SALES TAX	57.83
			ESTIMATED	81
			TOTAL	2,528

Ravin 3737

AUTHORIZATION _____

TITLE _____

DATE _____

223642