

* Amended *

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

AMENDED

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33640
Name: Haas Petroleum, LLC
Address: 800 West 47th Street, Suite #409
City/State/Zip: Kansas City, MO 64112
Purchaser: Plains Marketing, L.P.
Operator Contact Person: Mark Haas
Phone: (816) 531.5922
Contractor: Name: Skyy Drilling, LLC
License: 33557
Wellsite Geologist: David Griffin, RG.

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. _____

09/07/07 09/11/07 10/13/07
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

API No. 15 - 207-27247-0000
County: Woodson
NW NW NW Sec. 18 Twp. 24 S. R. 14 East West
5230 feet from (S) / N (circle one) Line of Section
4705 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: HO Kimbell Well #: 20
Field Name: Winterschied

Producing Formation: Mississippian Dolomite
Elevation: Ground: 1091.7' Kelly Bushing: 1098.2'
Total Depth: 1695' Plug Back Total Depth: 1680'
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 _____ 1695'
feet depth to _____ surface _____ w/ _____ 200 _____ sx cmt.

AMD - Dlg - 12/5/08

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: Marcia Littell
Title: Agent Date: 5/13/08
Subscribed and sworn to before me this 15th day of May,
2008.
Notary Public: Maureen Elton
Date Commission Expires: 9/18/2010

Maureen Elton
Notary Public State of Kansas
My Appt Expires 9/18/2010

KCC Office Use ONLY
Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION
MAY 16 2008

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Haas Petroleum, LLC Lease Name: HO Kimbell Well #: 20
 Sec. 18 Twp. 24 S. R. 14 East West County: Woodson

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: Dual Induction LL3 High Resolution Compensated Density | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum Mississippian Dolomite 1630 (532) |
|---|---|

| CASING RECORD <input checked="" 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 1/4" | 8 5/8" | 20.5# | 40' | Class "A" | 35 | 2% CaCl ₂ , 2% Gel |
| Production | 7 7/8" | 4 1/2" | 9.5# | 1680' | 60/40 Poz Mix | 200 | 8% Gel, 1/4# Flocele |
| | | | | | | | |

| 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 |
|----------------|---|---|------------|
| 4 SPF | 1625-1635' | 500 gal. 15% HCL | 1625-1635' |
| | | | |
| | | | |
| | | | |

| | | | | |
|---------------|----------------|--------|-----------|--|
| TUBING RECORD | Size 2 3/8" | Set At | Packer At | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---------------|----------------|--------|-----------|--|

| | |
|---|--|
| Date of First, Resumerd Production, SWD or Enhr. Waiting on Approval | 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 <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 checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____ | Production Interval |
|--|--|---------------------|

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 16 2008
 CONSERVATION DIVISION
 WICHITA, KS