

ORIGINAL

Form ACO-1
October 2008
Form Must Be Typed

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

*KEE
7/30/09*

OPERATOR: License # 4567
Name: D.E. Exploration, Inc.
Address 1: P.O. Box 128
Address 2: _____
City: Wellsville State: KS Zip: 66092 + 0128
Contact Person: Douglas G. Evans
Phone: (785) 883-4057
CONTRACTOR: License # 5989
Name: Finney Drilling Co.
Wellsite Geologist: None
Purchaser: Maclasley Oilfield Services, Inc.

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW
 Gas ENHR SIGW
 CM (Coal Bed Methane) Temp. Abd.
 Dry Other _____
(Core, WSW, Expl., Cathodic, etc.)

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If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr. Conv. to SWD
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Docket No.: _____
 Dual Completion Docket No.: _____
 Other (SWD or Enhr.?) Docket No.: _____
May 18th, 2009 May 21st, 2009 May 21st, 2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-091-23353-00-00
Spot Description: S2 N2 NW NE
S2 N2 NW NE Sec. 12 Twp. 15 S. R. 21 East West
4675' Feet from North / South Line of Section
1980 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Johnson
Lease Name: Ross Well #: 9
Field Name: Edgerton
Producing Formation: Bartlesville
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 905' Plug Back Total Depth: 895'
Amount of Surface Pipe Set and Cemented at: 22.0 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: _____
feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH II NR 9-9-09
(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: Douglas G. Evans
Title: President Date: July 30th, 2009
Subscribed and sworn to before me this 30th day of July,
20 09.
Notary Public: Stacy J. Thyer
Date Commission Expires: _____

NOTARY PUBLIC
STATE OF KANSAS
STACY J. THYER
My Appt. Exp. 3-31-2011

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

Operator Name: D.E. Exploration, Inc. Lease Name: Ross Well #: 9
 Sec. 12 Twp. 15 S. R. 21 East West County: Johnson

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: Gamma Ray/Neutron/CCL	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 1/4"	7"	NA	22	Portland	10	Service Company
Production	5 5/8"	2 7/8"	NA	895'	50/50 Poz	129	Service Company

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 <i>(Amount and Kind of Material Used)</i>	Depth
29	839.0'-852.5'	2" DML RTG	839.0'-852.5'

TUBING RECORD:	Size: <u>2 7/8"</u>	Set At: <u>895'</u>	Packer At: <u>No</u>	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil Bbls. <u>NA</u>	Gas Mcf <u>NA</u>	Water Bbls. <u>NA</u>	Gas-Oil Ratio <u> </u> Gravity <u> </u>

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 <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 229734

Invoice Date: 05/26/2009 Terms:

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D.E. EXPLORATION
DOUG EVANS
P.O. BOX 128
WELLSVILLE KS 66092
(785) 883-4057

ROSS 9
20040
NE 12-15-21 JO
05/22/2009

Part Number	Description	Qty	Unit Price	Total
1110A	KOL SEAL (50# BAG)	720.00	.3900	280.80
1111	GRANULATED SALT (50 #)	266.00	.3100	82.46
1118B	PREMIUM GEL / BENTONITE	342.00	.1600	54.72
1124	50/50 POZ CEMENT MIX	129.00	9.2500	1193.25
4402	2 1/2" RUBBER PLUG	1.00	22.0000	22.00

Description	Hours	Unit Price	Total
370 80 BBL VACUUM TRUCK (CEMENT)	1.50	94.00	141.00
495 CEMENT PUMP	1.00	870.00	870.00
495 EQUIPMENT MILEAGE (ONE WAY)	25.00	3.45	86.25
495 CASING FOOTAGE	895.00	.00	.00
510 MIN. BULK DELIVERY	1.00	296.00	296.00

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Parts:	1633.23	Freight:	.00	Tax:	104.53	AR	3131.01
Labor:	.00	Misc:	.00	Total:	3131.01		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____

Date _____

BARTLESVILLE, OK
918/338-0808

ELDORADO, KS
316/322-7022

EUREKA, KS
620/583-7664

GILLETTE, WY
307/686-4914

MCALESTER, OK
918/426-7667

OTTAWA, KS
785/242-4044

THAYER, KS
620/839-5269

WORLAND, WY
307/347-4577



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 20040
LOCATION Off Hwy 9
FOREMAN Alan Mader

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
5-22-09	2835	Ross #9	NE 12	15	21	Jo
CUSTOMER <u>DE Exploration</u>			TRUCK #			
MAILING ADDRESS <u>P.O. Box 128</u>			DRIVER			
CITY <u>Wellsville</u>			TRUCK #			
STATE <u>KS</u>			DRIVER			
ZIP CODE <u>66092</u>			TRUCK #			
			DRIVER			

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 905 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 895 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING yes
DISPLACEMENT 5.1 DISPLACEMENT PSI _____ MIX PSI _____ RATE 5 bpm

REMARKS: Checked casing depth. Mixed & pumped 100# gel to flush hole followed by 129 sk 50/50 poz, 5# Kol-seal, 5% salt 2% gel. Circulated cement. Flushed pump. Pumped plug to casing TD. Well held 800 PSI. Set float. Closed valve.

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		870.00
5406	25	MILEAGE		86.25
5402	895'	Casing footage		NC
5407	min	tan miles		296.00
5502C	172	80VGL		141.00
1110A	720 #	Kol-seal		280.80
1111	266 #	salt		82.46
1118B	342 #	gel		54.72
1124	129 sk	50/50 poz		493.25
4402	1	2 1/2 plug		22.00
			6.4%	SALES TAX
				ESTIMATED TOTAL

Ravtr 3737

AUTHORIZATION No company rep TITLE _____ DATE _____

WO # 229734

104.53
3131.01

DRILLERS LOG

API NO. 15-091-23353-00-00 **S. 12** **T. 15** **R. 21** **E.** **W.**
OPERATOR: D.E. EXPLORATION INC. **LOCATION:** NW - NE
ADDRESS: P.O. BOX 128 **COUNTY:** JOHNSON
WELLSVILLE, KS 66092
WELL #: 9 **LEASE NAME:** ROSS
FOOTAGE LOCATION: 4675 FEET FROM (N) (S) LINE 1980 FEET FROM (E) (W) LINE
CONTRACTOR: FINNEY DRILLING COMPANY **GEOLOGIST:** DOUG EVANS
SPUD DATE: 5/18/2009 **TOTAL DEPTH:** 905
DATE COMPLETED: 5/21/2009 **OIL PURCHASER:** PLAINS MARKETING

CASING RECORD

PURPOSE	SIZE OF HOLE	SIZE OF CASING	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	12 1/4	7	19	22	I	10	SERVICE COMPANY
PRODUCTION:	5 5/8	2 7/8	6.5	895	S	112	SERVICE COMPANY

WELL LOG

CORES: #.1 -840 - 858 **RAN:** _____

RECOVERED: _____

ACTUAL CORING TIME: _____

FORMATION	TOP	BOTTOM	FORMATION	TOP	BOTTOM
TOP SOIL	0	3	LIME	559	564
CLAY	3	22	SHALE	564	568
LIME	22	26	LIME	568	572
SHALE	26	30	SHALE	572	578
LIME	30	43	LIME	578	585
SHALE	43	50	SHALE	585	602
LIME	50	60	LIME	602	606
SHALE	60	67	SHALE	606	610
LIME	67	75	SAND & LIME	610	620
SHALE	75	82	SHALE	620	634
LIME	82	87	LIME	634	636
RED BED	87	94	SHALE	636	646
SHALE	94	115	LIME	646	648
LIME	115	155	SHALE	648	692
SHALE	155	185	LIME	692	694
LIME	185	195	SHALE	694	705
SHALE	195	209	LIME	705	707
LIME	209	216	SHALE	707	742
SHALE	216	220	LIME	742	744
LIME	220	231	SHALE	744	816
SHALE	231	250	LIME	816	817
LIME	250	256	SHALE	817	839
SHALE	256	270	OIL LIME	839	840
LIME	270	272	OIL SAND	840	853
SHALE	272	318	SAND & SHALE	853	886
KC LIME	318	339	LIME	886	887
SHALE	339	346	SHALE	887	905 T.D.
LIME	346	371			
SHALE	371	374			
KC LIME	374	380			
SHALE	380	524			
LIME	524	526			
SHALE	526	559			

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