

OCT 25 2007

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

RECEIVED
KANSAS CORPORATION COMMISSION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6766
Name: N & W Enterprises, Inc.
Address: 1111 S Margrave
City/State/Zip: Fort Scott, KS 66701
Purchaser: Plains Marketing, LP
Operator Contact Person: Tom Norris
Phone: (620) 223-6559
Contractor: Name: Hat Drilling, LLC
License: 33734
Wellsite Geologist: _____

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: _____
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. _____

08/28/2007 10/01/2007
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 037-21909-00-00
County: Crawford
C N/2 Sec. 33 Twp. 28 S. R. 22 East West
3960 feet from (S) N (circle one) Line of Section
2640 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Walsh/Meyer Well #: 40

Field Name: Walnut SE
Producing Formation: Bartlesville

Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 406 Plug Back Total Depth: 405
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 405
feet depth to Top w/ 59 sx cmt.

Drilling Fluid Management Plan Ait II NCR 1-14-09
(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: [Signature]
Title: President Date: 10/22/07
Subscribed and sworn to before me this 22nd day of October,
2007.
Notary Public: [Signature]
Date Commission Expires: 3.30.09

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

NOTARY PUBLIC - State of Kansas
VIRGINIA L. NORRIS
My Appt Exp 3-30-09

OCT 25 2007

Operator Name: N & W Enterprises, Inc. Lease Name: Walsh/Meyer Well #: 40
 Sec. 33 Twp. 28 S. R. 22 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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
 Name Bartlesville Top 370 Datum 380
380 390

List All E. Logs Run:

Gamma Ray Neutron

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	8	7	20	Portland #1	5	
Production	5 5/8	2 7/8	7.8 4.9	405	Portland #1	59	

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
2	380 to 390	20 Sack sand frac	380-390

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8	405	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enh.		Producing Method			
10/01/2007		<input type="checkbox"/> Flowing <input checked="" 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
	.50	N/A	3		30

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 _____

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 25 2007

CONSERVATION DIVISION
 WICHITA, KS

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

4 of 4

TICKET NUMBER 15663
 LOCATION Ottawa
 FOREMAN Alan Mader

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																				
9-5-07	5624	Walsh Meyer # 40	33	28	22	CR																				
CUSTOMER A & W Enterprises			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>516</td> <td>Alan M</td> <td></td> <td></td> </tr> <tr> <td>164</td> <td>Rick A</td> <td></td> <td></td> </tr> <tr> <td>569</td> <td>Gary A</td> <td></td> <td></td> </tr> <tr> <td>510</td> <td>Jason H</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	516	Alan M			164	Rick A			569	Gary A			510	Jason H		
TRUCK #	DRIVER	TRUCK #	DRIVER																							
516	Alan M																									
164	Rick A																									
569	Gary A																									
510	Jason H																									
MAILING ADDRESS 1111 S Margrave																										
CITY Font Scott	STATE KS	ZIP CODE 66701																								
JOB TYPE long string	HOLE SIZE 5 5/8	HOLE DEPTH 408	CASING SIZE & WEIGHT 2 7/8																							
CASING DEPTH 405	DRILL PIPE	TUBING	OTHER																							
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING																							
DISPLACEMENT 2.3	DISPLACEMENT PSI	MIX PSI	RATE																							
REMARKS: Established circulation. Mixed & pumped 100# gel followed by 59 sk OWC cement. Circulated cement to surface. Flushed pump clean. Pumped plug to casing TD. Well held 500 PSI. Mixed cement heavier than normal to hold down formation pressure.																										

Alan Mader

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	164	840.00
5406	65 = 4 =	MILEAGE	164	57.60
5402	405'	Casing Footage	164	
5407A		ton miles	510	274.53
5502C	1 1/2	80 gal	369	135.00
RECEIVED KANSAS CORPORATION COMMISSION OCT 25 2007 CONSERVATION DIVISION WICHITA, KS				
1118B	100#	gel		15.00
1126	59 sk	OWC		908.60
4402	1	2 1/2 plug		20.00
			Sub Total	2246.13
			CASH Discount	- 44.94
				2201.19
			Tax	39.45
			Total	2266.28
			SALES TAX	
			ESTIMATED TOTAL	

AUTHORIZATION

Thomas L. Brown

TITLE

DATE