

ORIGINAL

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

KE
12/21/09

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
Wellsite Geologist: None
Purchaser: Maclaskey Oilfield Services, Inc.
Designate Type of Completion:
 New Well _____ Re-Entry _____
_____ 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 22nd, 2009 May 27th 2009 May 27th, 2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-091-23352-00-00
Spot Description: SW NE NW NE
SW NE NW NE Sec. 12 Twp. 15 S. R. 21 East West
4900 Feet from North / South Line of Section
1760 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Johnson
Lease Name: ROSS Well #: I-5
Field Name: Edgerton
Producing Formation: Bartlesville
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 895' Plug Back Total Depth: 881'
Amount of Surface Pipe Set and Cemented at: 25.05 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 Alt II NR 9-11-09
(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 #: I-5
 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 (Attach Additional Sheets) 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 (Submit Copy) 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	25.05	Portland	10	Service Company
Production	5 5/8"	2 7/8"	NA	881.0	50/50 Poz	120	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				

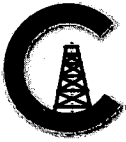
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Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
19	884.0' - 853.0' 844' - 853'	2" DML RTG	884.0' - 853.0'

Per Log
7/10/09

TUBING RECORD: Size: <u>2 7/8"</u> Set At: <u>881.0'</u> Packer At: <u>No</u> Liner Run: <input type="checkbox"/> Yes <input checked="" 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 (Explain)
Estimated Production Per 24 Hours	Oil Bbls. <u>NA</u> Gas Mcf <u>NA</u> Water Bbls. <u>NA</u> Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	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: _____ _____
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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 # 229792

Invoice Date: 05/29/2009 Terms:

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

ROSS I-5
20041
NE 12-15-21 JO
05/29/2009

Part Number	Description	Qty	Unit Price	Total
1110A	KOL SEAL (50# BAG)	665.00	.3900	259.35
1111	GRANULATED SALT (50 #)	246.00	.3100	76.26
1118B	PREMIUM GEL / BENTONITE	423.00	.1600	67.68
1124	50/50 POZ CEMENT MIX	120.00	9.2500	1110.00
4402	2 1/2" RUBBER PLUG	1.00	22.0000	22.00
Description		Hours	Unit Price	Total
368	CEMENT PUMP	1.00	870.00	870.00
368	EQUIPMENT MILEAGE (ONE WAY)	25.00	3.45	86.25
368	CASING FOOTAGE	881.00	.00	.00
370	80 BBL VACUUM TRUCK (CEMENT)	2.00	94.00	188.00
510	MIN. BULK DELIVERY	1.00	296.00	296.00

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Parts:	1535.29	Freight:	.00	Tax:	98.26	AR	3073.80
Labor:	.00	Misc:	.00	Total:	3073.80		
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 20041
LOCATION Ottawa
FOREMAN Alan Maden

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
5-29-09	2355	Ross I-5	NE 12	15	21	50
CUSTOMER D.E. Exploration			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS P.O. Box 128			516	Alan M		
CITY Wellsville			368	Bill Z		
STATE KS			380	Chuck L		
ZIP CODE 66092			510	Alan M		

JOB TYPE long string HOLE SIZE 5 7/8 HOLE DEPTH 895 CASING SIZE & WEIGHT 2 7/8
CASING DEPTH 881 DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING YES
DISPLACEMENT 3.12 DISPLACEMENT PSI _____ MIX PSI _____ RATE 4 bpm

REMARKS: Checked casing depth. Mixed & pumped 200# gel to flush hole due to well sitting extra. Mixed & pumped 133 gx 50150 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.

Kurts Rig

Alan Maden

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	881'	casing footage		296.00
5407	min	ton mileage		188.00
5502C	2 hr	80 vac		
1110A	665 #	Kol-seal		239.35
1111	246 #	salt		76.26
1118B	423	gel		67.68
1124	120 sk	50150 poz		1110.00
4402	1	2 1/2 plug		22.00
			SALES TAX	98.26
			ESTIMATED TOTAL	3073.80

Ravin 3737

AUTHORIZATION Doug was there TITLE _____ DATE _____

229792

DRILLERS LOG

API NO. 15-091-23352-00-00 **S. 12** **T. 15** **R. 21** **E. W.**
OPERATOR: D.E. EXPLORATION INC. **LOCATION:** SW - NE - NW - NE
ADDRESS: P.O. BOX 128 **COUNTY:** JOHNSON
WELLSVILLE, KS 66092
WELL #: I-5 **LEASE NAME:** ROSS
FOOTAGE LOCATION: 4900 FEET FROM (N) (S) LINE 1760 FEET FROM (E) (W) LINE
CONTRACTOR: FINNEY DRILLING COMPANY **GEOLOGIST:** DOUG EVANS
SPUD DATE: 5/22/2009 **TOTAL DEPTH:** 895
DATE COMPLETED: 5/27/2009 **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	25.05	I	10	SERVICE COMPANY
PRODUCTION:	5 5/8	2 7/8	6.5	881	S	117	SERVICE COMPANY

WELL LOG

CORES: # 1 - NO CORE

RAN: _____

RECOVERED: _____

ACTUAL CORING TIME: _____

FORMATION	TOP	BOTTOM	FORMATION	TOP	BOTTOM
TOP SOIL	0	3	LIME	561	566
CLAY	3	21	SHALE	566	569
SHALE	21	24	LIME	569	573
LIME	24	46	SHALE	573	581
SHALE	46	52	LIME	581	589
LIME	52	62	SHALE	589	604
SHALE	62	69	LIME	604	606
LIME	69	73	SAND & SHALE	606	614
SHALE	73	75	LIME	614	621
LIME	75	92	SHALE	621	635
RED BED	92	96	LIME	635	638
SHALE	96	115	SHALE	638	648
LIME	115	123	LIME	648	650
SHALE	123	125	SHALE	650	696
LIME	125	131	LIME	696	697
SHALE	131	132	SHALE	697	708
LIME	132	140	LIME	708	710
SHALE	140	186	SAND & SHALE	710	747
LIME	186	196	LIME	747	750
SHALE	196	211	SHALE	750	819
LIME	211	218	LIME	819	820
SHALE	218	224	SHALE	820	833
LIME	224	235	LIME	833	835
SHALE	235	252	SAND & SHALE	835	840
LIME	252	258	CAP LIME	840	844
SHALE	258	264	OIL SAND	844	853
LIME	264	268	OIL SAND & SHALE	853	855
SHALE	268	305	SAND & SHALE	855	890
LIME	305	307	LIME	890	892
SHALE	307	316	SHALE	892	893
KC LIME	316	340	LIME	894	895 T.D.
SHALE	340	347			
LIME	347	371			
SHALE	371	374			
LIME	374	378			
SHALE	378	382			
KC LIME	382	389			
SHALE	389	561			

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