

**CONFIDENTIAL**

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL RECEIVED** 9/11/09  
Form ACO-1  
September 1999  
KANSAS CORPORATION COMMISSION  
Form Must Be Typed

**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

SEP 12 2007

Operator: License # 5144  
Name: Mull Drilling Company, Inc.  
Address: P.O. Box 2758  
City/State/Zip: Wichita KS 67201-2758  
Purchaser: Eaglwing  
Operator Contact Person: Mark Shreve  
Phone: (316) 264-6366  
Contractor: Name: Duke Drilling Company, Inc.  
License: 5929  
Wellsite Geologist: Kevin Kessler

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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. \_\_\_\_\_

5/23/07 6/3/07 6/14/07  
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

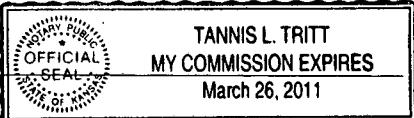
CONSERVATION DIVISION  
WICHITA, KS  
API No. 15 - 101-22022 -00-00  
County: Lane  
SW - SW - NE - SE Sec. 29 Twp. 17 S. R. 28  East  West  
1597 feet from S N (circle one) Line of Section  
1319 feet from E W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Reifschneider Well #: 2-29  
Field Name: Wildcat  
Producing Formation: Marmaton/Pleasanton/Lansing-KC  
Elevation: Ground: 2760' Kelly Bushing: 2769'  
Total Depth: 4660' Plug Back Total Depth: 4609'  
Amount of Surface Pipe Set and Cemented at 213 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 2168 Feet  
If Alternate II completion, cement circulated from surface  
feet depth to 2168' w/ 225 sx cmt.

**Drilling Fluid Management Plan** AH # MS 3-509  
(Data must be collected from the Reserve Pit)  
Chloride content 18,000 ppm Fluid volume 460 bbls  
Dewatering method used Evaporation  
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: \_\_\_\_\_  
Title: President/COO Date: 9/11/07  
Subscribed and sworn to before me this 11th day of September  
20 07  
Notary Public: Tannis L. Tritt  
Date Commission Expires: 3-26-11



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

Operator Name: Mull Drilling Company, Inc. Lease Name: Reifschneider Well #: 2-29  
 Sec. 29 Twp. 17 S. R. 28  East  West County: Lane

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**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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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:  <b>Superior: CDL/CNL; DIL; Sonic &amp; Micro</b>	<input checked="" type="checkbox"/> Log    Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>2167</td> <td>+ 617</td> </tr> <tr> <td>Lansing</td> <td>3978</td> <td>- 1208</td> </tr> <tr> <td>Marmaton</td> <td>4336</td> <td>- 1567</td> </tr> <tr> <td>Cherokee Shale</td> <td>4509</td> <td>- 1740</td> </tr> <tr> <td>Mississippian</td> <td>4567</td> <td>- 1798</td> </tr> </table>	Name	Top	Datum	Anhydrite	2167	+ 617	Lansing	3978	- 1208	Marmaton	4336	- 1567	Cherokee Shale	4509	- 1740	Mississippian	4567	- 1798
Name	Top	Datum																	
Anhydrite	2167	+ 617																	
Lansing	3978	- 1208																	
Marmaton	4336	- 1567																	
Cherokee Shale	4509	- 1740																	
Mississippian	4567	- 1798																	

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	# Sacs Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	20#	211'	Common	160	2% gel, 3% cc
Production	7 7/8"	5 1/2"	14#	4658'	SMD	175	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surface-2168'	SMD	225	

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	4400' - 4406'	500 gal 15% MCA	
4	4336' - 4339'	250 gal 15% MCA	
4	4262' - 4270'	500 gal 15% MCA	

TUBING RECORD	Size Set At 2 3/8"    4577'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 6/14/07		Producing Method <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. 122	Gas Mcf 0	Water Bbls. 0    Gas-Oil Ratio N/A    Gravity

Disposition of Gas    METHOD OF COMPLETION    Production Interval

Vented     Sold     Used on Lease     Open Hole     Perf.     Dually Comp.     Commingled  
*(If vented, Submit ACO-18.)*     Other (Specify) \_\_\_\_\_

**RECEIVED**  
**KANSAS CORPORATION COMMISSION**  
**SEP 12 2007**  
**CONSERVATION DIVISION**  
**WICHITA, KS**

# ALLIED CEMENTING CO., INC. 23914

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

H2 Band

DATE <u>5-23-07</u>	SEC. <u>29</u>	TWP. <u>17</u>	RANGE <u>28</u>	CALLED OUT <u>9:00 AM</u>	ON LOCATION <u>12:30 pm</u>	JOB START <u>12:45 pm</u>	JOB FINISH <u>1:15 pm</u>
LEASE <u>Reid Schneider</u>		WELL # <u>2-29</u>	LOCATION <u>Dighton 3E 4N 1W</u>		COUNTY <u>Lane</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>			<u>1/4 N 1/4 W</u>				

CONTRACTOR Duke Dugan #4

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 223

CASING SIZE 8 7/8 DEPTH 223 213

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT 13 1/2 - 13

OWNER

CEMENT

AMOUNT ORDERED 160 Com 3% cc 2% H2O

COMMON	<u>160 cu</u>	@	<u>11.10</u>	<u>1776.00</u>
POZMIX		@		
GEL	<u>3 cu</u>	@	<u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>5 cu</u>	@	<u>46.60</u>	<u>233.00</u>
ASC		@		

### EQUIPMENT

PUMP TRUCK CEMENTER L. Weishaara

# 120 HELPER DURIE WEST

BULK TRUCK

# 342 DRIVER Don DUGAN

BULK TRUCK

# DRIVER

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HANDLING	<u>168 cu</u>	@	<u>1.90</u>	<u>319.20</u>
MILEAGE	<u>168 mi</u>	@	<u>35</u>	<u>529.20</u>
TOTAL				<u>2907.35</u>

### REMARKS:

New 20"  
case 8 7/8 cas w/ long pump  
mix cement, deep plug w/ OAL  
cement dust case

Thanks

CHARGE TO: Mull Dugan Co

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

### SERVICE

DEPTH OF JOB	<u>223</u>			
PUMP TRUCK CHARGE				<u>815.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>35</u>	@	<u>6.00</u>	<u>210.00</u>
MANIFOLD		@		
<u>HEAD RENTAL</u>		@	<u>100.00</u>	<u>100.00</u>

TOTAL 1125.00

### PLUG & FLOAT EQUIPMENT

<u>8 7/8 Teapack</u>	@	<u>60.00</u>	<u>60.00</u>
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To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

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CONSERVATION DIVISION  
WICHITA, KS

TOTAL 60.00

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE Rich Wheeler

Rich Wheeler  
PRINTED NAME



CHARGE TO: **MOLL DRUG. Co. Inc**  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

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 WICHITA, KS

TICKET No 12200

PAGE 1 OF 1

1. SERVICE LOCATIONS <b>NESS CITY, KS</b>	WELL/PROJECT NO. <b>2-29</b>	LEASE <b>RETSCHWEDDER</b>	COUNTY/PARISH <b>LAJE</b>	STATE <b>KS</b>	CITY	DATE <b>6-8-07</b>	OWNER <b>SAME</b>
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <b>Co Tools</b>		RIG NAME/NO.	SHIPPED VA <b>CT</b>	DELIVERED TO <b>LOCATION</b>	ORDER NO.	
3. WELL TYPE <b>OIL</b>	WELL CATEGORY <b>DEVELOPMENT</b>	JOB PURPOSE <b>CRUIT PORT COLLAR</b>	WELL PERMIT NO.		WELL LOCATION <b>DEWON, KS - 4N, 2E, N-W</b>		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF			U/M		U/M		
575		1			MILEAGE # 104	45	MI	4	00	180	00
578		1			PUMP SERVICE	1	JOB	2168	00	1250	00
105		1			PORT COLLAR OFFERING TOOL	1	JOB	400	00	400	00
330		1			SWIFT MULTI-DRISORY STAINLESS	225	SKS	14	50	3262	50
276		1			FLOCELS	56	LBS	1	25	70	00
290		1			DADR	2	GAL	32	00	64	00
581		1			SERVICE CHARGE COMPT	225	SKS	1	10	247	50
583		1			DRAVAGE	22326	LBS	502.34	TM	1	00

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X  
 DATE SIGNED **6-8-07** TIME SIGNED **1000**  A.M.  P.M.

REMIT PAYMENT TO:  
**SWIFT SERVICES, INC.**  
**P.O. BOX 466**  
**NESS CITY, KS 67560**  
**785-798-2300**

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO				
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	<b>5976   34</b> <b>201   21</b> <b>6177   55</b>

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES - The customer hereby acknowledges receipt of the materials and services listed on this invoice.

SWIFT OPERATOR  
**WADE WILSON**

APPROVAL  
*[Signature]*

Thank You!

06/15/2007 08:23 FAX 7197678994 MDC-CHEV WELLS CO MDC WICHITA 001/002

# SWIFT Services, Inc.

## JOB LOG

DATE **6-8-07** PAGE NO. **1**

CUSTOMER **MOL DRUG Co. Inc** WELL NO. **2-29** LEASE **RETSCHWEDER** JOB TYPE **COMPT PORT COLLAR** TICKET NO. **12200**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBLS)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1000							ON LOCATED
								TUBING - 2 3/8 CASING - 5 1/2 PORT COLLAR - 2168
	1030				✓		1000	PRE TEST CASING - HELD
	1035	3	2	✓		400		OPEN PORT COLLAR - EJS RATE
	1035	4	125	✓		400		MAX COMPT 225 SWS SMA 1/4" FLOCELF P/SK
	1120	3 1/2	7 1/2	✓		500		DISPARE COMPT
	1130			✓		1000		CLOSE PORT COLLAR - PRETEST - HELD
								CIRCULATE 20 SWS COMPT TO POT
	1140	3 1/2	20	✓		400		RUN 4 JTS - CIRCULATE CLEAN
								WASH TRUCK
								PULL TOOL
	1230							JOB COMPLETE

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THANK YOU  
WAVE, DUSTY, JEFF

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SUPERVISION DIVISION



CHARGE TO: **MOLL DRUG Co. Inc.**  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

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**SEP 12 2007**

TICKET No **12194**

PAGE **1** OF **2**

SERVICE LOCATIONS  
**1. NESS CITY, KS**

WELL/PROJECT NO. **2-29** LEASE **RETSCHWEDER** COUNTY/PARISH **LANE** STATE **Ks** CITY **WICHITA, KS** DATE **6-3-07** OWNER **SAME**

TICKET TYPE  SERVICE  SALES CONTRACTOR **DYKE DRUG #4** RIG NAME/NO. **LOCATION** SHIPPED VIA **CT** DELIVERED TO **LOCATION** ORDER NO.

WELL TYPE **OIL** WELL CATEGORY **DEVELOPMENT** JOB PURPOSE **5 1/2" LONGSTRECH** WELL PERMIT NO. WELL LOCATION **DEIGHTON, KS - 42, 2E, N.W**

REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	UM	QTY.	UM	
575		1			MILEAGE #104	40	ME		4.00	160.00
578		1			PUMP SERVICE	1	JOB	4660	Ks	1250.00
280		1			FLOCKECK 21	1000	GAL		2.75	2750.00
400		1			GUIDE SHOE	1	EA	5 1/2"	140.00	140.00
402		1			CENTRALIZERS	13	EA		95.00	1235.00
403		1			CONWT BASAT	1	EA		290.00	290.00
404		1			PORT COLLAR TOP JT #60	1	EA	2168	Ks	2300.00
410		1			TOP PLUG	1	EA		100.00	100.00
415		1			INSERT FLOAT COLLAR w/ FOL UP	1	EA		330.00	330.00
416		1			BOTTOM PLUG	1	EA		160.00	160.00
419		1			ROTATING HEAD RENTAL	1	JOB		250.00	250.00

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

*[Signature]*  
 DATE SIGNED **6-3-07** TIME SIGNED **2:00**  P.M.

**REMIT PAYMENT TO:**  
**SWIFT SERVICES, INC.**  
**P.O. BOX 466**  
**NESS CITY, KS 67560**  
**785-798-2300**

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	AMOUNT
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#1	8965.00
WE UNDERSTOOD AND MET YOUR NEEDS?				#2	3196.68
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				subtotal	12,161.68
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	541.21
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		Lane 5.3%	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TOTAL	12,702.89

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby certifies that the materials and services shown on this invoice were received and accepted by the customer on the date and time indicated above.

SWIFT OPERATOR **WAVE WILSON** APPROVAL:

Thank You!

08/12/2007 09:20 FAX 7197678994 MDC-CHEY WELLS CO MDC WICHITA 001/003



PO Box 466  
Ness City, KS 67560  
Off: 785-798-2300

# TICKET CONTINUATION

TICKET No. 12194

CUSTOMER MULL DRUG CO. INC.	WELL REZESCHNEMER 2-29	DATE 6-3-07	PAGE 2	OF 2
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PRICE	SECT	DEPTH	TIME	DESCRIPTION	QTY	UNIT	AMOUNT	TOTAL
330			1	SWIFT MULTZ-READY STANDARD	175	SKS	1450	2537.50
276			1	FLOCELE	44	LBS	126	551.00
290			1	0 ACR	2	GAL	32.00	64.00
				SERVICE CHARGE				
581			1			CUBIC FEET		
583			1			TOW MILES		
				TOTAL WEIGHT	17384	LOADED MILES	40	
							175	110
							347.68	1100
							192.50	347.68

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 WICHITA, KS

**CONFIDENTIAL**  
 3196.68

08/12/2007 09:20 FAX 7197678994  
 MDC-CHEY\_WELLS.CO  
 MDC WICHITA  
 002/003

**JOB LOG**

**SWIFT Services, Inc.**

DATE 6-3-07 PAGE NO 7

CUSTOMER **MULL DRUG, Co, Inc** WELL NO. **2-29** LEASE **RETSCHWEDER** JOB TYPE **5 1/2" LONGSTRIK** TICKET NO. **12194**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL/GAL)	PUMP		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2100							ON LOCATION
	2245							START 5 1/2" CASING IN WELL
								TD-4660' CMT BSKT - 60
								TP-4662' PORT COLLAR = 2168 TOP #60
								ST-42' SET = 4659 5 1/2" #14
								CENTRALIZERS-1,2,3,4,5,6,7,8,9,10,11,12,59
	0055							ABDP BALL - CIRCULATE ROTATE
	0232	6	5		✓		400	PUMP 5 BBL SPACE "
	0233	6	24		✓		400	PUMP 1000 GAL FLOWCHECK 21 "
	0237	6	5		✓		400	PUMP 5 BBL SPACE "
	0244		2		✓			DROP BOTTOM PLUG - LOAD TOP PLUG
	0247		4 1/2					PLUG RH (15 GAL)
	0250	5	45		✓		250	MGR CMPT (160 GAL) SMA = 14.0 PPG "
	0300							WASH OUT PUMP - LINES
	0302							RELEASE TOP PLUG
	0304	7	0		✓			DISPLACE PLUG
		6 1/2	102				650	SHUT OFF ROTATING
	0320	4	112.7				1250	PLUG DOWN
	0322						OK	RELEASE PSC - HELD
								WASH TRUCK
	0430							THANK YOU JOB COMPLETE WAYNE, DUSTY, AND JEFF

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