

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5144
Name: Mull Drilling Company, Inc.
Address: P.O. Box 2758
City/State/Zip: Wichita KS 67201-2758
Purchaser: Plains Marketing, LLC
Operator Contact Person: Mark Shreve
Phone: (316) 264-6366
Contractor Name: Southwind Drilling, Inc.
License: 33350
Wellsite Geologist: Kevin Kessler

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. _____

8/1/06	8/11/06	9/1/06
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 135-24528 - 0000
County: Ness
SE NW NE NW Sec. 3 Twp. 20 S. R. 23 East West
388 feet from S (N) (circle one) Line of Section
1836 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Stum Well #: 1-3
Field Name: Wildcat

Producing Formation: Ft. Scott
Elevation: Ground: 2237' Kelly Bushing: 2247'
Total Depth: 4430' Plug Back Total Depth: 4358'
Amount of Surface Pipe Set and Cemented at 224 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1527' Feet
If Alternate II completion, cement circulated from 1527'
feet depth to surface w/ 205 sx cmt.

Drilling Fluid Management Plan Att II NJ 97509
(Data must be collected from the Reserve Pit)

Chloride content 39,000 ppm Fluid volume 975 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.: _____

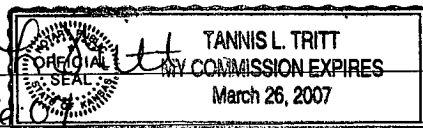
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: 11/16/06

Subscribed and sworn to before me this 16th day of November

20 06
Notary Public: Tannis L. Tritt
Date Commission Expires: 3-26-07



KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
NOV 17 2006

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Operator Name: Mull Drilling Company, Inc. Lease Name: Stum Well #: 1-3
 Sec. 3 Twp. 20 S. R. 23 East West County: Ness

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: ELI: CNL/CDL PE; DIL; Micro & Sonic	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attachment "A" <div style="text-align: center;"> KCC NOV 16 2006 CONFIDENTIAL </div>
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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	# Sacjs Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24#	224'	Common	160	2% gel, 3% cc
Production	7 7/8"	4 1/2"	10.5#	4420'	SMD	100	

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-1527'	SMD	205	

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
4	4274' - 4280'	250 gal 15% MCA	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	4325'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
9/1/06		<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
	53	0	0	N/A	40.5

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) _____

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**ATTACHMENT TO ACO-1
Well Completion Form**

**Mull Drilling Company, Inc.
Stum #1-3
SE NW NE NW 3-20S-23W
Ness County, Kansas
API #: 15-135-24528**

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LOG TOPS

<u>FORMATION</u>	<u>DEPTH</u>	<u>SUBSEA</u>
Anhydrite	1494	(+753)
Base Anhy	1532	(+715)
Heebner Shale	3708	(-1461)
Lansing	3755	(-1508)
Stark Shale	4014	(-1767)
B/KC	4085	(-1840)
Marmaton	4110	(-1861)
Pawnee	4190	(-1943)
Ft. Scott	4266	(-2019)
Cherokee Sh.	4290	(-2045)
Cherokee Sd.	4360	(-2113)
Mississippian	4398	(-2151)
RTD	4430	(-2183)
LTD	4428	(-2181)

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CHARGE TO: **MULL DRUG, G. INC.**
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

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 KCC WICHITA
 TICKET No 10629
 PAGE 1 OF 1

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SERVICE LOCATIONS: 1. **NESS CITY, KS**
 WELL/PROJECT NO.: **1-3** LEASE: **STUM** COUNTY/PARISH: **NESS** STATE: **Ks** CITY: _____ DATE: **8-17-06** OWNER: **SAME**
 2. TICKET TYPE: SERVICE CONTRACTOR: _____ RIG NAME/NO.: _____ SHIPPED VIA: **CT** DELIVERED TO: **LOCATION** ORDER NO.: _____
 3. WELL TYPE: **ODZ** WELL CATEGORY: **DEVELOPMENT** JOB PURPOSE: **CHMT PORT COLLAR** WELL PERMIT NO.: _____ WELL LOCATION: **NESS CITY, KS - 75, 2 1/4 E. SS**
 4. REFERRAL LOCATION: _____ INVOICE INSTRUCTIONS: _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			UM		UM	
575		1			MILEAGE 104	15	MC		4.00	60.00
577		1			PUMP SERVICE	1	JOB		850.00	850.00
105		1			PORT COLLAR OPENING TOOL	1	JOB		400.00	400.00
330		1			SWIFT MULTI-DESKY STANDARD	215	SD		12.50	2687.50
276		1			FLOCEL	56	lbs		1.25	70.00
290		1			D-APL	1	gal		32.00	32.00
581		1			SERVICE CHARGE CHMT	225	SD		1.10	247.50
583		1			DRYAGE	22326	lbs	167.45	1.00	167.45

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

DATE SIGNED: **8-17-06** TIME SIGNED: **0900** 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?				4514.45
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

NESS TAX 5.3% 109.04
 TOTAL 4683.49

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

SWIFT OPERATOR: **WANE WILSON** APPROVAL: _____

Thank You!

001/007
 MDC WICHITA
 MDC-CHEY_WELLS.CO
 08/25/2006 11:07 FAX 7197678994

JOB LOG

SWIFT Services, Inc.

DATE **8-17-06** PAGE NO.

CUSTOMER **MULL DRUG. Co. INC** WELL NO. **1-3** LEASE **SSVM** JOB TYPE **CMT PORT COLLAR** TICKET NO. **10629**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) GALT	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0830							ON LOCATION
								2 3/8 x 4 1/2 PORT COLLAR - 1528'
	0920				✓		1000	PSI-TEST CASING - HELD
	0925	3	2	✓		400		OPW PORT COLLAR - 215 BPC
	0930	4	120	✓		400		MAX CMHT 215 SKS STD 1/4" x 1/2" FIBRECE - 11.2 PPG
	1005	4	5	✓		580		REPLACE CMHT
	1010				✓		1000	CLOSE PORT COLLAR - PSI-TEST - HELD
								SECURE WITH 10 SKS CMHT TO DST
	1020	3	20		✓		450	RW 4 JTS CIRCULATE CLEAN
								WASH UP TRUCK
								PULL TOOLS
	1100							JOB COMPLETE
								THANK YOU WAZIE, DUSTY, SEAN

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

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 TICKET No 10573
 PAGE 1 OF 2

SERVICE LOCATIONS 1. NESS CITY, KS	WELL/PROJECT NO. 1-3	LEASE STUM	COUNTY/PARISH NESS	STATE Ks	CITY WICHITA	DATE 8-12-06	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR SOUTHWIND DRUG.	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 4 1/2" LONGSTRONG	WELL PERMIT NO.	WELL LOCATION NESS CITY, KS - 7S, 2 1/4 E		
4. 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	15	MC		4.00	60.00
578		1			PUMP SERVICE	1	JOB	4420	100	1250.00
280		1			FLOCHECK-21	1000	GA		2.75	2750.00
400		1			GUIDE SHOE	1	EA	4 1/2"	90.00	90.00
402		1			CENTRALIZERS	8	EA		50.00	400.00
403		1			CSMWT BASKETS	1	EA		230.00	230.00
404		1			PORT COLLAR TOP JT # 69	1	EA	1528	100	2100.00
410		1			TOP PLUG	1	EA		90.00	90.00
413		1			ROTO WALL SCRATCHERS	10	SA		35.00	350.00
415		1			DISSET FLOAT COLLAR w/ FELL UP	1	EA		275.00	275.00
416		1			BOTTOM PLUG	1	EA		90.00	90.00
419		1			ROTARY 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

X *[Signature]*
 DATE SIGNED **8-11-06** TIME SIGNED **2300**
 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 #1	7935.00
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				#2	1870.75
WE UNDERSTOOD AND MET YOUR NEEDS?				subtotal	9805.75
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				TAX	437.69
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				Less 5.3%	
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	10,243.14
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

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

SWIFT OPERATOR *Wave Wason* APPROVAL

Thank You!

003/007
 MDC WICHITA
 MDC-CHEY_WELLS.CO
 08/25/2006 11:07 FAX 7197678994

TICKET CONTINUATION

TICKET No. 10573



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

CUSTOMER MULL DRUG CO. WELL STUM 1-3 DATE 8-12-06 PAGE 2 OF 12

PRICE REFERENCE	SECONDARY REFERENCE / INVOICE NUMBER	ACCOUNT	QUANTITY	DESCRIPTION	WELL				DATE	AMOUNT	
					WT	LN	AT	LN			
330		1		SWIFT MULTI-DEGREE STUMM	125	SKS			8-12-06	12.50	1562.50
276		1		FLOCEL	31	WBS				1.25	38.75
290		1		D-ADR RECEIVED	2	GA				32.00	32.00
				NOV 17 2006							
				KCC WICHITA							
				KCC							
				NOV 16 2006							
				CONFIDENTIAL							
581		1		SERVICE CHARGE	CUBIC FEET					1.10	137.50
582		1		TOTAL WEIGHT	TON MILES					100.00	100.00
				12391	15						
					92.93						

CONTINUATION TOTAL 1870.75

004/007
MDC WICHITA
MDC-CHEY_WELLS.CO
08/25/2006 11:07 FAX 7197678994

JOB LOG

SWIFT Services, Inc.

DATE **8-12-06** PAGE NO. **1**

CUSTOMER **MULL OIL Co.** WELL NO. **1-3** LEASE **STUM** JOB TYPE **4 1/2" LONGSTRAW** TICKET NO. **10573**

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (WELL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	2300							ON LOCATION
	2330							START 4 1/2" CASING ON WELL
								TD- 4428 SITE 4420
								TD- 4420 4 1/2 #/FT 10.5
								ST- 42.14
								CENTERS - 1, 2, 3, 4, 5, 6, 7, 68
								CMT BKT - P22 69
								PORT COLLAR c. 1528' TOP IT # 69
	0130							DROP BALL - CALIBRATE ROTATE
	0315	6	5		✓		400	PUMP SPACER KCC NOV 16 2006 " "
	0316	6	24		✓		400	PUMP FLOCHECK-21 CONFIDENTIAL " "
	0320	6	5		✓		400	PUMP SPACER - DROP BOTTOM PLUG " "
	0335		4 1/2					PLUG RH-MH (25SKS)
	0342	4 1/2	28		✓		250	MIX CSMT - 100 SKS SMA c. 14.0 PPG " "
	0350							WASH OUT AMP. LINES
	0352							RELEASE TOP PLUG
	0355	6 1/2	0		✓			DISPARE PLUG " "
		6 1/2	59				550	SHUT OFF ROTATING RECEIVED NOV 17 2006 " "
	0405	6	69.6				1200	PLUG DOWN KCC WICHITA
	0407						OK	RELEASE PST-HELS WASH UP TRUCK
	0500							JOB COMPLETE
								THANK YOU WAWIE, DUSTY, SEAN