

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6470
Name: Schankie Well Service, Inc.
Address: 1006 SW Blvd, PO Box 397
City/State/Zip: Madison, KS 66860
Purchaser: SemGroup
Operator Contact Person: Randall Schankie
Phone: (620) 437-2595
Contractor: Name: Rig 6 Drilling Co., Inc.
License: 30567
Wellsite Geologist: William Stout

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. _____

<u>11-05-06</u>	<u>11-09-06</u>	<u>11-09-06</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15-073-24043-00-00
County: Greenwood
W2 NENW-NE Sec. 5 Twp. 23 S. R. 11 East West
330 feet from S / (N) (circle one) Line of Section
1850 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Seeley Well #: 10
Field Name: Seeley-Wick
Producing Formation: Bartlesville
Elevation: Ground: 1180' Kelly Bushing: NA
Total Depth: 1994' Plug Back Total Depth: 1978'
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from surface
feet depth to 1978' w/ 250 ^{sq cmt.}
AH2-Dlg-11/15/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume NA bbls
Dewatering method used Vacuum Truck
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: Randall Schankie, Sec
Title: Secretary Date: 11-07-07
Subscribed and sworn to before me this 7th day of November,
20 07.
Notary Public: Rachel Ballard
Date Commission Expires: 5-6-2010

RACHEL D. BALLARD
Notary Public - State of Kansas
My Appt. Expires 5-6-2010

KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
NOV 08 2007

Operator Name: Schankie Well Service, Inc Lease Name: Seeley Well #: 10
 Sec. 5 Twp. 23 S. R. 11 East West County: Greenwood

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)

List All E. Logs Run:
 Gamma-Ray - Neutron

<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample		
Name	Top	Datum
Cherokee	1708	-528
Ardmore	1780	-600
Bartlesville Sand	1894	-714
Base Bart Sand	1965	-785
RTD	1994	-814

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	NA	8 5/8"	NA	40'	Common	15	NA
Production	6 3/4"	4 1/2"	11.6#	1993'	Common	250	6% gel

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
	1905' - 1915' 8 shots	500 gal 15% HCL Acid	
	1918' - 1928' 8 shots	10000# Sand Frac	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	1905'	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
NA		<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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA	NA	NA		

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

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

TICKET NUMBER 16499
 LOCATION Eureka
 FOREMAN Troy Strickler

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-9-06	7309	Seeley #10				G.W.
CUSTOMER Schankie Well Service			Rig 6			
MAILING ADDRESS P.O. Box 397						
CITY Madison	STATE Ks	ZIP CODE 66860				
TRUCK # DRIVER TRUCK # DRIVER						
			463	Kyle		
			439	Jared		
			479	Jeff		
			436	Russ		

JOB TYPE Longstring HOLE SIZE 6 3/4" HOLE DEPTH 1994' CASING SIZE & WEIGHT 4 1/2" 11.6"
 CASING DEPTH 1998' K8 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8# 14.2" SLURRY VOL 648bl WATER gal/sk 7.8" CEMENT LEFT in CASING 0'
 DISPLACEMENT 318bl DISPLACEMENT PSI 700 MIX PSI 1100 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2" casing. Break Circulation w/ 158bl
Water. Mixed 125sk 60/40 Poz-Mix Cement w/ 6% Gel, 1/4" Flocele
@ 12.8" Perf. Tail in w/ 125sk Regular Cement w/ 2% Gel, 1%
Cacl₂ + 4" Kol-Seal Perf/sk @ 14.2" Perf. Wash out Pump + lines Release
Plug. Displace w/ 318bl water. Final Pump Pressure 700PSI. Bump Plug
to 1100PSI. Wait 2mins Release Pressure. Floatoff. Good Cement
to surface = 158bl Slug to Pit. Job Complete.

Note: Rotate Casing During Cementing.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	800.00	800.00
5406	20	MILEAGE	3.15	63.00
1131	125sk	60/40 Poz-mix	9.35	1168.75
1118A	650#	Gel 6%	.14	91.00
1107	30"	Flocele 1/4" Perf/sk	1.80	54.00
1104S	125sk	Regular Cement	11.25	1406.25
1118A	250#	Gel 2%	.14	35.00
1102	120#	Cacl ₂ 1%	.64	76.80
1110A	500#	Kol-Seal 4" Perf/sk	.36	180.00
5407A	11.5 Ton	Ten-Mileage Bulk Trucks	1.05	241.50
5502C	2hrs	808bl Vac Truck	75.00	150.00
1123	3000gal	Crty Water	12.80	38.40
4404	1	4 1/2" Top Rubber Plug	40.00	40.00
5611	1	4 1/2" Rental / Rotating head	52.00	52.00
		Sub Total		4396.70
		Thank You!	632	SALES TAX 194.68
		210454		ESTIMATED TOTAL 4591.38

RECEIVED
 KANSAS CORPORATION COMMISSION
 NOV 08 2007
 CONSERVATION DIVISION
 WICHITA, KS

AUTHORIZATION Called by Cliff TITLE owner DATE _____