

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 # 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. _____

12-05-06 12-19-06 12-19-06
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15-073-24045-00-00
County: Greenwood
SW-SE Sec. 27 Twp. 23 S. R. 11 East West
2310 feet from S (circle one) Line of Section
1650 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Butte Well #: 2

Field Name: Seeley-Wick
Producing Formation: Bartlesville
Elevation: Ground: 1149' Kelly Bushing: NA
Total Depth: 1994' Plug Back Total Depth: 1989'
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 1989'
feet depth to Surface w/ 250 ^{sq cmt.}

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. _____

RECEIVED
KANSAS CORPORATION COMMISSION
DEC 07 2007
CONSERVATION DIVISION
WICHITA, KS

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: 12-03-07
Subscribed and sworn to before me this 6th day of December
20 07
Notary Public: Rachel D. Ballard
Date Commission Expires: 5-6-2010

RACHEL D. BALLARD
Notary Public - State of Kansas
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

CONSOLIDATED OIL WELL SERVICES, LLC

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

DEC 17 2007

TICKET NUMBER 16633

LOCATION EUREKA

FOREMAN Kevin McCoy

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY																				
12-19-06	7309	Butte # 2	27	235	11E	Gov																				
CUSTOMER <u>Schankie Well Service</u>			<table border="1"> <thead> <tr> <th>TRUCK #</th> <th>DRIVER</th> <th>TRUCK #</th> <th>DRIVER</th> </tr> </thead> <tbody> <tr> <td>445</td> <td>Justin</td> <td></td> <td></td> </tr> <tr> <td>439</td> <td>JERRID</td> <td></td> <td></td> </tr> <tr> <td>479</td> <td>CLIFF</td> <td></td> <td></td> </tr> <tr> <td>436</td> <td>Russ</td> <td></td> <td></td> </tr> </tbody> </table>				TRUCK #	DRIVER	TRUCK #	DRIVER	445	Justin			439	JERRID			479	CLIFF			436	Russ		
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MAILING ADDRESS <u>P.O. Box 397</u>																										
CITY <u>Madison</u>	STATE <u>Ks</u>	ZIP CODE <u>66860</u>																								

Rig
6

JOB TYPE Longstring HOLE SIZE 6 3/4 HOLE DEPTH 1994' CASING SIZE & WEIGHT 4 1/2 11.60" new
 CASING DEPTH 1997' K.B. DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 12.8 - 14.2 SLURRY VOL 67 BBL WATER gal/sk 8.0 CEMENT LEFT in CASING 0'
 DISPLACEMENT 31 BBL DISPLACEMENT PSI 700 PSI 1200 Bump Plug RATE _____

REMARKS: Safety Meeting: Rig up to 4 1/2 casing w/ Rotating Swivel Break Circulation
w/ 10 BBL Fresh water. Mixed 125 sks 60/40 Pozmix Cement w/ 6% Gel, 1/4"
Floccle per/sk @ 12.8" per/gal yield 1.60. Tail in w/ 125 sks Regular Cement
w/ 2% Gel, 1% CACL2, 4" Kel-Seal per/sk @ 14.2" per/gal yield 1.42. wash
out Pump & Lines. Shut down. Release Plug. Displace w/ 31 BBL Fresh water.
Final Pumping Pressure 700 PSI. Bump Plug to 1200 PSI. wait 2 minutes.
Release Pressure. Float Held. Shut casing in @ 0 PSI. Good Cement Returns to
Surface = 6 BBL Slurry. Job Complete. Rig down.
Note: Rotated casing while mixing & displacing cement.

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	125 SKS	60/40 Pozmix Cement	9.35	1168.75
1118 A	650 *	Gel 6% } Lead	.14 "	91.00
1107	30 "	1/4" Floccle per/sk } Cement	1.80	54.00
1104 S	125 SKS	Regular class "A" Cement	11.25	1406.25
1118 A	250 *	Gel 2% } TAIL	.14 "	35.00
1102	120 "	CACL2 1% } Cement	.64 "	76.80
1110 A	500 *	Kel-Seal per/sk 4"	.36 "	180.00
5407 A	11.25 TONS	20 miles BULK TRUCKS	1.05	236.26
5502 C	2 HRS	80 BBL UAC TRUCK	90.00	180.00
1123	3000 GAL	City water	12.80 ^{per 1000}	38.40
4404	1	4 1/2 Top Rubber Plug	40.00	40.00
5611	1	Rental on 4 1/2 Rotating Swivel	52.00	52.00
			Sub Total	4421.46
			SALES TAX 6.3%	194.68
			ESTIMATED TOTAL	4616.14

THANK YOU

211090

AUTHORIZATION witnessed by Cliff Schankie

TITLE Partner

DATE _____