

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32711

Name: Mike Becker

Address 1: 15135 Broadmoor

Address 2: _____

City: Stanley State: MO Zip: 66223 + _____

Contact Person: Mike Becker

Phone: (913) 271-7631 or 913-271-5179

CONTRACTOR: License # 32711

Name: Mike Becker

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil SWD SIOW
- Gas ENHR SIGW
- CM (Coal Bed Methane) Temp. Abd.
- Dry Other

(Core, WSW, Exp. Log, 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. Conv. to SWD

Plug Back: _____ Plug Back Total Depth _____

Commingled Docket No.: _____

Dual Completion Docket No.: _____

Other (SWD or Enhr.?) Docket No.: _____

2-9-2009 2-12-2009 3-6-2009

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date Recompletion Date

API No. 15 - 011-23445-0000

Spot Description: _____

NE NE SW SE Sec. 3 Twp. 25 S. R. 22 East West

1155 Feet from North / South Line of Section

1485 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Bourbon

Lease Name: Hartman Well #: 3

Field Name: Uniontown

Producing Formation: Mississippi

Elevation: Ground: unknown Kelly Bushing: unknown

Total Depth: 700 Plug Back Total Depth: n/a

Amount of Surface Pipe Set and Cemented at: 20 feet Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: 20 feet

feet depth to: surface w/ 5

Handwritten: AHZ-DG-10/8/09 ^{sx cmt}

Drilling Fluid Management Plan

(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: Mike Becker

Title: _____ Date: 9-19-09

Subscribed and sworn to before me this 19 day of September

20 09.

Notary Public: Chloean Longgood

Date Commission Expires: 8-18-2011

KCC Office Use ONLY

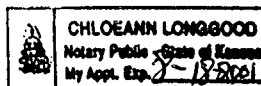
N Letter of Confidentiality Received

If Denied, Yes Date: _____

_____ Wireline Log Received

_____ Geologist Report Received

_____ UIC Distribution



Operator Name: Mike Becker Lease Name: Hartman Well #: 3
 Sec. 3 Twp. 25 S. R. 22 East West County: Bourbon

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 <i>(Attach Additional Sheets)</i> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>soil</td> <td>10</td> <td></td> </tr> <tr> <td>oil show</td> <td>225</td> <td></td> </tr> <tr> <td>oil show</td> <td>375</td> <td></td> </tr> <tr> <td>oil show</td> <td>665-700</td> <td></td> </tr> </table>	Name	Top	Datum	soil	10		oil show	225		oil show	375		oil show	665-700	
Name	Top	Datum														
soil	10															
oil show	225															
oil show	375															
oil show	665-700															

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	# Sacks Used	Type and Percent Additives
Surface	10 1/2 inch	8 inch	16	20 feet	portland	5	none
Long string	6 3/4 inch	4 1/2 inch	9	661 feet	OWC	70	?
Pump string		1 inch	n/a	670 feet	n/a	n/a	n/a

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
		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED SEP 21 2009 KCC WICHITA </div>	

TUBING RECORD: Size: <u>4 1/2 inch</u> Set At: <u>661 feet</u>		Packer At: <u>open formation sanded off</u>		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>n/a</u>			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. <u>8</u>	Gas Mcf <u>44mcf</u>	Water Bbls. <u>minimal</u>	Gas-Oil Ratio <u>n/a</u>	Gravity <u>27</u>

DISPOSITION OF GAS: <input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input checked="" type="checkbox"/> Open Hole <input 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 # 229147

Invoice Date: 03/19/2009 Terms:

Page 1

BECKER, MIKE
15135 BROADMOOR
STANLEY KS 66223
(913)271-7631

HARTMAN 3
3-25-22
20001
03/06/09

Part Number	Description	Qty	Unit Price	Total
1118B	PREMIUM GEL / BENTONITE	100.00	.1600	16.00
1126	OIL WELL CEMENT	70.00	16.0000	1120.00
Description		Hours	Unit Price	Total
368	CEMENT PUMP	1.00	870.00	870.00
368	EQUIPMENT MILEAGE (ONE WAY)	65.00	3.45	224.25
368	CASING FOOTAGE	661.00	.00	.00
370	80 BBL VACUUM TRUCK (CEMENT)	2.50	94.00	235.00
503	MIN. BULK DELIVERY	1.00	296.00	296.00
516	PICK-UP MILEAGE	65.00	3.43	222.95

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SEP 21 2009
KCC WICHITA

*TO
CK# 2415
Thank you
Luzanna
A/R*

Parts:	1136.00	Freight:	.00	Tax:	71.57	AR	3055.77
Labor:	.00	Misc:	.00	Total:	3055.77		
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 20001
LOCATION Ottawa
FOREMAN Alan Madeu

PO Box 884, Chanute, KS 66720
820-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
3-6-09	3216	Hartman #3	SE 3	25	22	BB
CUSTOMER <u>Mike Becker</u>			TRUCK #	DRIVER	TRUCK #	DRIVER
MAILING ADDRESS <u>15135 Broadmoor</u>			<u>516</u>	<u>Alan M</u>		
CITY	STATE	ZIP CODE	<u>568</u>	<u>Bill Z</u>		
<u>Stanley</u>	<u>KS</u>	<u>66223</u>	<u>370</u>	<u>Ken H</u>		
			<u>503</u>	<u>Artem M</u>		
JOB TYPE <u>long string</u>	HOLE SIZE <u>6 1/2</u>	HOLE DEPTH <u>661</u>	CASING SIZE & WEIGHT <u>4 1/2</u>			
CASING DEPTH <u>661</u>	DRILL PIPE	TUBING	OTHER			
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING <u>YES</u>			
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE <u>4 bpm</u>			
REMARKS: <u>Checked depth. Washed 20' of sand out of well.</u> <u>Established rate. Mixed & pumped 100# gel to flush</u> <u>hole. Mixed & pumped 70 sk OWC cement behind.</u> <u>10 1/2 gal water, circulating 4 568 cement returns.</u> <u>Closed well.</u>						

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5101	1	PUMP CHARGE		270.00
5406	65 mi	MILEAGE		224.25
5407	661'	Casing footage		296.00
5302C	2 1/2	80 gal		235.00
5605 B	68 miles	well packer delivery		222.95
11165	100#	gel		16.00
1126	70 sk	OWC		1120.00
		Sub		2984.20
PAID #2415				
THANKS				
		6.13%	SALES TAX	71.57
			ESTIMATED TOTAL	3055.77

Alan Madeu
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SEP 21 2009
KCC WICHITA

PAID #2415
THANKS

Form 9797

AUTHORIZATION

TITLE

229647

DATE

3055.77