

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 # 32219
Name: Production Maintenance Service
Address: 3922 CR 1250
City/State/Zip: Coffeyville, KS 67337
Purchaser: Energy Quest Management
Operator Contact Person: Mike McClenning
Phone: (620) 988-0042
Contractor: Name: MOKAT
License: 5831
Wellsite Geologist: Mike McClenning

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. _____

9-16-06 9-20-06 9-28-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-31221-0000
County: Montgomery
NE4 NW4 NW4 Sec. 25 Twp. 34s S. R. 14 East West
330' feet from S (circle one) Line of Section
850' feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: HWR Well #: 1
Field Name: Tyro
Producing Formation: Riverton, AW coal

Elevation: Ground: 925 Kelly Bushing: _____
Total Depth: 1575 Plug Back Total Depth: _____
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 1571
feet depth to Surface _____ w/ 180 _____ sx cmt.

Alt-2-Dig-1/13/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used none

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 M. McClenny
Title: Owner/Operator Date: 1/27/07
Subscribed and sworn to before me this 29th day of January,
2007.
Notary Public: Regina K. Warner
Date Commission Expires: 01-16-09

KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

RECEIVED

JAN 30 2007

KCC WICHITA

REGINA K. WARNER
Notary Public - State of Kansas
My Appt. Expires 1-16-09

Operator Name: Production Maintenance Service Lease Name: HWR Well #: 1
 Sec. 25 Twp. 34s S. R. 14 East West County: Montgomery

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 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: DIL,NDL,GR,CB,CCL,VDL	<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>Wayside</td> <td>670</td> <td>+225</td> </tr> <tr> <td>Oswego Lime</td> <td>1018</td> <td>-93</td> </tr> <tr> <td>Mississippian</td> <td>1544</td> <td>-619</td> </tr> </table>	Name	Top	Datum	Wayside	670	+225	Oswego Lime	1018	-93	Mississippian	1544	-619
Name	Top	Datum											
Wayside	670	+225											
Oswego Lime	1018	-93											
Mississippian	1544	-619											

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	11.75"	8 5/8	24	40	portland	12	none
Production	6 3/4"	4.5"	10.5	1571	portland	180	see ticket

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

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
4spf	1515-1519	15%hcl	1515-19
6spf	1485-1491	15%hcl	1485-91

TUBING RECORD	Size 2 3/8"	Set At 1525	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 1-26-07		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. 0	Gas Mcf 35'	Water Bbls. 20	Gas-Oil Ratio 0
				Gravity 0

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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CONSOLIDATED
OIL WELL
SERVICES, INC.
 AN INFINITY COMPANY

REMIT TO
 Consolidated Oil Well Services, Inc.
 Dept. 1228
 Denver, CO 80256

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/467-8878
 FAX 620/431-0012

INVOICE

Invoice # **209276**

Invoice Date: **09/25/2006** Terms:

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PRODUCTION MAINTENANCE SERVICE
 3922 CR 1250
 COFFEYVILLE KS 67337
 (620)948-3727

HWR #1
 07457
 9/20/06
 25-34-14

Part Number	Description	Qty	Unit Price	Total
1104	CLASS "A" CEMENT	16920.00	.1200	2030.40
1107A	PHENOSEAL (M) 40# BAG)	160.00	1.0000	160.00
1110	GILSONITE (50#)	1800.00	.4600	828.00
1111	GRANULATED SALT (50 #)	400.00	.2900	116.00
1118B	PREMIUM GEL / BENTONITE	650.00	.1400	91.00
1123	CITY WATER	7000.00	.0128	89.60
4404	4 1/2" RUBBER PLUG	1.00	40.0000	40.00

T-64	Description	Hours	Unit Price	Total
428	WATER TRANSPORT (CEMENT)	4.00	98.00	392.00
438	80 BBL VACUUM TRUCK (CEMENT)	4.00	90.00	360.00
492	TON MILEAGE DELIVERY	1.00	359.97	359.97
492	CEMENT PUMP	1.00	800.00	800.00
492	EQUIPMENT MILEAGE (ONE WAY)	35.00	3.15	110.25
492	CASING FOOTAGE	1571.00	.17	267.07

Parts:	3355.00	Freight:	.00	Tax:	177.81	AR	5822.10
Labor:	.00	Misc:	.00	Total:	5822.10		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, OK
 P.O. Box 1453 74006
 918/338-0808

BURBANK, KS
 820 E. 7th 67045
 620/583-7864

OTTAWA, KS
 2831 So. Eisenhower Ave. 68067
 785/242-4044

GILLETTE, WY
 300 Enterprise Avenue 82716
 307/686-4914

TRUYEN, KS
 8855 Dorn Road 66776
 620/338-5288

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CONSOLIDATED
OIL WELL
SERVICES, INC.
 AN INFINITY COMPANY

REMIT TO
 Consolidated Oil Well Services, Inc.
 Dept. 1228
 Denver, CO 80256

MAIN OFFICE
 P.O. Box 884
 Chanute, KS 66720
 620/431-9210 • 1-800/487-8878
 FAX 620/431-0012

INVOICE

Invoice # 209526

Invoice Date: 09/30/2006 Terms:

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PRODUCTION MAINTENANCE SERVICE
 3922 CR 1250
 COFFEYVILLE KS 67337
 (620)948-3727

HWR 1
 29625
 09-29-06

Part Number	Description	Qty	Unit Price	Total
3107	15% HCL	500.00	1.3000	650.00
1252	MAX FLO	10.00	35.0000	350.00
1215	KCL SUB (ESA-55) MB6875	8.00	24.7500	198.00
1123	CITY WATER	4620.00	.0128	59.14
4326	7/8" RUBBER BALL SEALERS	80.00	2.2600	180.80

Description	Hours	Unit Price	Total
424 ACID PUMP CHARGE(1500 GALLON)	1.00	690.00	690.00
424 ACID EQUIPMENT MILEAGE	45.00	3.15	141.75
T-90 WATER TRANSPORT (ACID)	3.00	98.00	294.00
BALLI BALL INJECTOR	1.00	90.00	90.00

Parts:	1437.94	Freight:	.00	Tax:	12.71	AR	2666.40
Labor:	.00	Misc:	.00	Total:	2666.40		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

BARTLESVILLE, Ok
 P.O. Box 1483 74005
 918/338-0608

BUNDEKA, Ks
 820 E. 7th 67045
 620/683-7684

OTTAWA, Ks
 2631 So. Eisenhower Ave. 68087
 785/242-4044

GILLETTE, WY
 300 Enterprise Avenue 82718
 307/688-4914

TOWER, Ks
 8655 Dem Road 66778
 620/639-6299

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