

Full
11/24/08

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 # 5556
Name: VIVA INTERNATIONAL INC
Address: 8357 MELROSE DRIVE
City/State/Zip: LENEXA, KS 66214
Purchaser: CMT TRANSPORTATION
Operator Contact Person: ROBERT P BUKATY
Phone: (913) 859-0438
Contractor: Name: HAT DRILLING
License: 33734
Wellsite Geologist: KEN OGLE

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

10/06/2007 10/08/2007 11/12/2007
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 107-23902-0000
County: LINN
SW SE SE SE Sec. 18 Twp. 22 S. R. 22 East West
50 feet from (S) N (circle one) Line of Section
580 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: WRIGHT Well #: 28-W
Field Name: BLUE MOUND

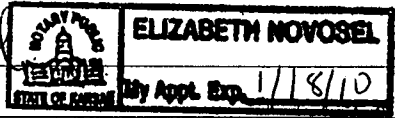
Producing Formation: BARTLESVILLE
Elevation: Ground: 1305 Kelly Bushing: _____
Total Depth: 720' Plug Back Total Depth: 714.5'
Amount of Surface Pipe Set and Cemented at _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 714.5'
feet depth to SURFACE w/ 110 112-Dlg-12/22/08 ^{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: [Signature]
Title: PRESIDENT Date: 06/26/2008
Subscribed and sworn to before me this 26 day of June,
20 08.
Notary Public: Elizabeth Novosel
Date Commission Expires: 11/8/10



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 21 2008
CONSERVATION DIVISION
WICHITA, KS

Operator Name: VIVA INTERNATIONAL INC Lease Name: WRIGHT Well #: 28-W
 Sec. 18 Twp. 22 S. R. 22 East West County: LINN

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: GAMMA RAY/NEUTRON/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name <u>BARTLESVILLE</u> Top <u>641'</u> Datum _____
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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	# Sacks Used	Type and Percent Additives
SURFACE	8 5/8"	7"		20.00'	OWC	6	
PRODUCTION	5 5/8"	2 7/8"	6.5#	714.5'	OWC	110	2% 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
1	644.0' - 662.0' (20 PERFS)	SPOT 75 GAL ACID 15% HCL	
		BREAK PSI @ 1600#	
		TREATING PSI 1300-1400#	
		SAND 200# 20/40, 200# 12/20, 200# 8/12	
		ISIP 575#	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. N/A AWAITING APPROVAL	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 _____

INVOICE

HAT. Drilling
 12391 Ks Hwy 9
 Mound City, Ks 66056

No. 128

INVOICE DATE	10-9-07
CUSTOMER'S ORDER NO.	

SOLD TO:	Viva International
	Wright #28-W T.D. 920'

SHIP TO:	

SALESPERSON	SHIPPED VIA	TERMS	F.O.B.

QTY. ORDERED	QTY. SHIPPED	DESCRIPTION	UNIT	AMOUNT
	920'	@ \$7.00/Lt		\$5040.00
	3 1/4	hrs coring @ \$200/hr		\$650.00
	6	bags of cement		\$60.00
	-			
		Total ->		\$5750.00

872

INVOICE

RECEIVED
 KANSAS CORPORATION COMMISSION

NOV 21 2008

CONSERVATION DIVISION
 WICHITA, KS



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 # 217296

Invoice Date: 10/17/2007 Terms: 0/30,n/30 Page 1

VIVA INTERNATIONAL INC.
ATTN: ROBERT
8357 MELROSE DRIVE
LENEXA KS 66214
(913)859-0438

WRIGHT 28-W
18-22-22
15749
10/09/07

Part Number	Description	Qty	Unit Price	Total
1126	OIL WELL CEMENT	110.00	15.4000	1694.00
1118B	PREMIUM GEL / BENTONITE	200.00	.1500	30.00
4402	2 1/2" RUBBER PLUG	1.00	20.0000	20.00
Description		Hours	Unit Price	Total
495	CEMENT PUMP	1.00	840.00	840.00
495	EQUIPMENT MILEAGE (ONE WAY)	50.00	3.30	165.00
503	MIN. BULK DELIVERY	1.00	285.00	285.00
T-106	80 BBL VACUUM TRUCK (CEMENT)	3.50	90.00	315.00

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Parts:	1744.00	Freight:	.00	Tax:	92.43	AR	3441.43
Labor:	.00	Misc:	.00	Total:	3441.43		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. BOX 884, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER 15749

LOCATION Ottawa, KS

FOREMAN Jim Green

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-9-07	8507	Wright # 28-W	18	22	22	Linn

CUSTOMER <u>Viva International</u>		
MAILING ADDRESS <u>8357 Melrose Dr</u>		
CITY <u>Lexena</u>	STATE <u>Ks</u>	ZIP CODE <u>66214</u>

TRUCK #	DRIVER	TRUCK #	DRIVER
389	Jim Green		
495	Casey Kennedy		
505/5-106	Rick Kibb		
503	Richard Sr		

JOB TYPE <u>Longstring</u>	HOLE SIZE <u>5 5/8"</u>	HOLE DEPTH <u>720'</u>	CASING SIZE & WEIGHT <u>2 7/8" EUEE</u>
CASING DEPTH <u>714.5'</u>	DRILL PIPE _____	TUBING _____	OTHER _____
SLURRY WEIGHT _____	SLURRY VOL _____	WATER gal/sk _____	CEMENT LEFT in CASING _____
DISPLACEMENT _____	DISPLACEMENT PSI _____	MIX PSI _____	RATE _____

REMARKS: Establish circulation. Mix and pump 200# Gel, mixed and pumped 110sk pwc. Flush pump clear of cement. Pump 2 7/8" Rubber Plug to total depth of casing. Pressure up to 800# PSI Held good. Circulated Cement to surface.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	One	PUMP CHARGE Cement Pump		840.00
5406	50	MILEAGE Cement Pump mileage		165.00
5407	min	Bulk Fuel Mileage		285.00
5502C	3 1/2 HRS	VACTK		315.00
1126	110sk	OWL		1694.00
1118B	200#	Premium Gel		30.00
4402	One	2 7/8" Rubber Plug		20.00
				Sub 3349.00
				SALES TAX <u>92.43</u>
				ESTIMATED TOTAL <u>3441.43</u>

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KANSAS CORPORATION COMMISSION
NOV 21 2008
CONSERVATION DIVISION
WICHITA, KS

AUTHORIZATION [Signature]

TITLE WOT# 217296

DATE _____