

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

*[Handwritten Signature]*  
10/29/08

Operator: License # 5786  
Name: McGown Drilling, Inc.  
Address: P.O. Box K  
City/State/Zip: Mound City, KS 66056  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Doug McGown  
Phone: (913) 795-2258  
Contractor: Name: McGown Drilling, Inc.  
License: 5786  
Wellsite Geologist: \_\_\_\_\_

API No. 15 - 107-23910-0000  
County: Linn  
C NE SE Sec. 34 Twp. 22 S. R. 23  East  West  
1980 feet from (S) N (circle one) Line of Section  
660 feet from (E) W (circle one) Line of Section

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: Squire Well #: 9-34

If Workover/Re-entry: Old Well Info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_

Field Name: \_\_\_\_\_  
Producing Formation: Bartlesville  
Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_  
Total Depth: 742' Plug Back Total Depth: 460  
Amount of Surface Pipe Set and Cemented at 20 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 440  
feet depth to surface w/ 50 sx cmt.

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. \_\_\_\_\_

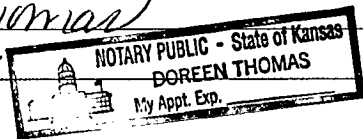
<u>10-18-07</u>	<u>10-24-07</u>	<u>11-01-07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

Drilling Fluid Management Plan AH II NR 1-5-09  
(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: Donda S. McGown  
Title: Secretary Date: 10/29/08

Subscribed and sworn to before me this 29 day of October,  
20 08.  
Notary Public: Doreen Thomas  
Date Commission Expires: 8-31-09



**KCC Office Use ONLY**

*N* Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

RECEIVED  
KANSAS CORPORATION COMMISSION  
NOV 03 2008  
CONSERVATION DIVISION  
WICHITA, KS

Operator Name: McGown Drilling, Inc. Lease Name: Squire Well #: 9-34  
 Sec. 34 Twp. 22 S. R. 23  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 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  Name Top Datum  *See Attached Sheet
--	--

CASING RECORD <input type="checkbox"/> New <input checked="" 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 1/4"	7"	15	20'	Portland	5	none
Long String	6 1/4"	2 3/8"	4.5	440'	Portland	50	none

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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	

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 WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method <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

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) \_\_\_\_\_

**SQUIRE**

**#9-34**

**DEPTH**

**FORMATION**

0-3  
03-14'  
14-17  
17-23  
23-30  
30-42  
42-45  
45-48  
48-58  
58-61  
61-77  
77-84  
84-218  
218-220  
220-240  
240-250  
250-304  
304-306  
306-309  
309-333  
333-343  
343-348  
348-350  
350-356  
356-390  
390-407  
407-442  
442-503  
503-564  
564-565  
565-593  
593-594  
594-628  
628-640  
640-650  
650-651  
651-657  
657-720  
720-722  
722-742  
742'

Soil & Clay  
Lime  
Shale  
Lime  
Shale  
Lime  
Shale  
Lime  
Shale  
Lime  
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Shale  
Coal  
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TD

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CONSERVATION DIVISION  
WICHITA, KS



# Big Sugar Lumber



"Everything To Build Your Home"

∞ ∞ TWO LOCATIONS ∞ ∞

**Do-it center**  
1005 CLARK STREET  
FORT SCOTT, KANSAS 66701  
(620) 223-5279  
FAX (620) 223-1505

411 MAIN STREET  
MOUND CITY, KANSAS 66056  
(913) 795-2210  
FAX (913) 795-2194

THE MOUND CITY STORE ONLY  
MOUND CITY 411 MAIN STREET MOUND CITY MO

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCES	TERMS	CLERK	DATE	TIME
				ONE DAY DELIVERY			

SOLD TO

SHIP TO

YOUR COMPANY  
BIG SUGAR LUMBER  
MOUND CITY MO

SQUIRE

QUANTITY		U/M	ITEM NUMBER	DESCRIPTION	UNIT PRICE	NUMBER OF UNITS	BIG SUGAR PRICE	EXTENSION
SHIPPED	ORDERED							

AM

CREDIT DISCLOSURE: ACCOUNTS NOT PAID IN FULL IN 30 DAYS AFTER BILLING DATE ABOVE ARE SUBJECT TO SERVICE CHARGE COMPUTED BEFORE DEDUCTING CURRENT PAYMENTS AND/OR CREDITS APPEARING ON MONTHLY STATEMENT. KANSAS LIEN RIGHT LAWS APPLY ON MATERIAL PURCHASED FOR YOUR HOME. SERVICE CHARGE IS 1.5% PER MONTH (ALL RETURNS MUST BE ACCOMPANIED BY TICKET.) 20% RESTOCKING CHARGE ON NON-STOCK RETURN ITEMS.



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 FAX (913) 795-2194

TWO SIGN LUMBER MOUND CITY  
 ORDER NO. 1005 1005 1005 1005 1005

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCES	TERMS	CLERK	DATE	TIME
1005							

SOLD TO

SHIP TO

1005 1005 1005  
 1005 1005 1005  
 1005 1005 1005

*SHURE*

QUANTITY		U/M	ITEM NUMBER	DESCRIPTION	UNIT	NUMBER OF UNITS	BIG SUGAR PRICE	EXTENSION
SHIPPED	ORDERED							
10		80	1005	1005 1005 1005	1005	1005	1005	1005
10		100	1005	1005 1005 1005	1005	1005	1005	1005

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X *[Signature]*  
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 [Name]

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