

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 8076
Name: Gamma Resources, Inc.
Address: P. O. Box 800
City/State/Zip: Liberal, Kansas 67905-0800
Purchaser: Duke Energy
Operator Contact Person: Terry W. Maxwell
Phone: (620) 624-6405
Contractor: Name: Big A Drilling
License: 31572
Wellsite Geologist: _____

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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: Kaiser Francis Oil Co.

Well Name: Black #1
Original Comp. Date: 5-19-1983 Original Total Depth: 6087

____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
 Plug Back 3700' Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
____ Other (SWD or Enhr.?) Docket No. _____

<u>5-28-2005</u>	<u>5-29-2005</u>	<u>6-7-2005</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 175 20688-00-03
County: Seward
NE NE NE Sec. 11 Twp. 34 S. R. 31 East West
320 4997 feet from S (circle one) Line of Section
320 437 feet from E W (circle one) Line of Section

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

Field Name: Iris
Producing Formation: Wabunsee

Elevation: Ground: 2726' Kelly Bushing: 2737'
Total Depth: 3707' Plug Back Total Depth: 3683'
Amount of Surface Pipe Set and Cemented at 1519' (Prev Opr) Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w: _____ sx cml.

Drilling Fluid Management Plan Workover P+A
(Data must be collected from the Reserve Pit) AH I nr
9-16-08
Chloride content 54000 ppm Fluid volume 300 bbls
Desalting method used evaporation

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: Terry W. Maxwell
Title: President Date: October 17, 2005
Subscribed and sworn to before me this 21st day of October
DS
Notary Public: Bonnie M. Keating
Date Commission Expires: 11-5-2006

BONNIE M. KEATING
Notary Public - State of Kansas
My Appt. Expires 11-5-2006

KCC Office Use ONLY

____ Letter of Confidentiality Received
If Denied, Yes No
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

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Operator Name: **Gamma Resources, Inc.** Lease Name: **Black** Well #: **2**
 Sec. **11** Twp. **34** S. R. **31** East West County: **Seward**

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:
CBL-GR-CCL

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Wabunsee	3586'	849'

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	# Socks Used	Type and Percent Additives
production	7 7/8	5 1/2	14.0	3700'	AA-2 prem	125	cal set & salt

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
4	3588-90'	400 gal 7 1/2 % MCA	3588-90'

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TUBING RECORD		Size	Set At	Packer At	Leak Run
		2 3/8	3671'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Entr.		Producing Method			
10-05-05		<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.	Gas Mcf	Water Bbls	Gas-Oil Ratio	Gravity
	n/a	5	300		

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dummy Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify) _____

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TREATMENT REPORT

Customer ID	Date
Customer <i>COMMA RESOURCES</i>	<i>5.30.05</i>
Lease <i>BLASH</i>	Lease No. Well #

Field Order #	Station <i>1.2.202</i>	Casing <i>5 1/2</i>	Depth <i>(...)</i>	County <i>SELA...</i>	State
Type Job <i>(...)</i>			Formation	Legal Description <i>(...)</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid <i>115' in AA 2 Pcs</i>		RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad <i>(...)</i>	Max			5 Min.
Volume	Volume	From	To	Pad	Min			10 Min.
Max Press	Max Press	From	To	Frac	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush <i>WATER</i>	Gas Volume			Total Load

Customer Representative <i>(...)</i>	Station Manager <i>JERRY BENNETT</i>	Treater <i>(...)</i>
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Service Units	<i>114</i>	<i>227</i>	<i>35</i>	<i>576</i>				
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0000</i>					<i>pad 115' in AA 2 Pcs</i>
<i>0003</i>					<i>Pre Pad (...)</i>
<i>0010</i>					<i>Pre Pad (...)</i>
<i>0015</i>					<i>Pre Pad (...)</i>
<i>0020</i>					<i>Pre Pad (...)</i>
<i>0025</i>					<i>Pre Pad (...)</i>
<i>0030</i>			<i>31</i>	<i>5</i>	<i>Pump 115' in AA 2 Pcs (114)</i>
<i>0035</i>					<i>Pre Pad (...)</i>
<i>0040</i>	<i>100</i>		<i>70</i>	<i>6</i>	<i>Pump 115' in AA 2 Pcs (114)</i>
<i>0045</i>	<i>100</i>			<i>1</i>	<i>Pre Pad (...)</i>
<i>0050</i>	<i>900</i>			<i>2</i>	<i>LAND PAD</i>
<i>0055</i>					<i>RELEASE FLOOT</i>
<i>0100</i>			<i>8</i>	<i>2</i>	<i>Pump 115' in AA 2 Pcs (114)</i>
<i>0105</i>					<i>Pre Pad (...)</i>
<i>0110</i>					<i>Pre Pad (...)</i>
<i>0115</i>					<i>Pre Pad (...)</i>
<i>0120</i>					<i>Pre Pad (...)</i>

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INVOICE NO.
Date 09-20-05
Customer ID

Subject to Correction

FIELD ORDER 9866

Lease BLADE	Well # 2	Legal 11-45-31 W
County S. 27 N	State KS	Station L281-11
Depth	Formation	Shoe Joint
Casing 5/2	Casing Depth 205	TD
Customer Representative TERRY MAXWELL	Treater KING (KING)	Job Type 5/2 1/2 (W)

CHARGE

APPROXIMATE RESOURCES

AFE Number (Key A 11)	PO Number
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Materials Received by **X**

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
1003	10	PIPE (PREMIUM)				
1002	75	PIPE 102 RPT INSIDE				
1011	510	PIPE 5/2				
1021	520	PIPE 5/2				
1025	21	PIPE 3/2				
1027	1025	PIPE (102)				
1043	30	DEFORMER				
1044	500	TUBES				
1045	100	TOP RUBBER PLUG				
1047	100	FLYER 2 1/2 INSERT				
1000	100	THROAT LOCK				
1000	20	WATER 1 mls 20				
1007	100	POST SERVICE CHARGE				
1004	142	TUBES 7 mls 20				
1007	100	CUT PUMP 9 MTS				
1001	100	CUT HEAD RENTAL				
1001	100	P.V. DAMAGE				
		DISCOUNTED TOTAL				
		PLUS TAX				

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10/23/05

As consideration, the Customer agrees:

a) To pay ACID SERVICES, LLC in accord with the rates and terms stated in ACID SERVICES, LLC's current price list. Invoices are payable NET 30 after date of invoice. Upon Customers' default payment of Customer's account by the last day of the month following the month in which the invoice is dated, Customer agrees to pay interest thereon after default at the highest lawful contract rate applicable but never to exceed 18% per annum. In the event it becomes necessary to employ attorneys to enforce collection of said account, Customer agrees to pay all collection cost and attorney fees in the amount of the unpaid account.

b) To defend, indemnify, release and hold harmless ACID SERVICES, LLC, its divisions, subsidiaries, parent and affiliated companies and the officers, directors, employees, agents and servants of all of them from and against any claims, liability, expenses, attorney's fees, and costs of defense to the extent permitted by law for:

1. Damage to property owned by, in the possession of, or leased by Customer, and/or the well owner (if different from Customer), including, but not limited to, surface and subsurface damage. The term "well owner" shall include working and royalty interest owners.
2. Reservoir, formation, or well loss or damage, subsurface trespass or any action in the nature thereof.
3. Personal injury of death or property damage (including, but not limited to, damage to the reservoir, formation or well), or any damages whatsoever, growing out of or in any way connected with or resulting from pollution, subsurface pressure, losing control of the well and/or a well blowout or the use of radioactive material. The amount of this invoice is due and payable at ACID SERVICES, LLC, Dept. No. 1131, Tulsa, Oklahoma 74182. All terms of the Service Order with customer are incorporated herein and made a part hereof by reference.

The defense, indemnity, release and hold harmless obligations of Customer provided for in this Section b) and Section c) below shall apply to claims or liability even if caused or contributed to by ACID SERVICES, LLC's negligence, strict liability, or operated, or furnished by ACID SERVICES, LLC or any defect in the data, products, supplies, materials, or equipment of ACID SERVICES, LLC whether the preparation, design, manufacture, distribution, or marketing thereof, or from a failure to warn any person of such defect. Such defense, indemnity, release and hold harmless obligations of Customer shall not apply where the claims or liability are caused by the gross negligence or willful misconduct of ACID SERVICES, LLC. The term "ACID SERVICES, LLC" as used in said Sections b) and c) shall mean ACID SERVICES, LLC, its divisions, subsidiaries, parent and affiliated companies, and the officers, directors, employees, agents and servants of all of them.

c) That because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, ACID SERVICES, LLC is unable to guarantee the effectiveness of the products, supplies, or materials, nor the results of any treatment or service, nor the accuracy of any chart interpretation, research analysis, job recommendation or other data furnished by ACID SERVICES, LLC. ACID SERVICES, LLC personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that ACID SERVICES, LLC shall not be liable for and Customer shall indemnify ACID SERVICES, LLC against any damages from the use of such information.

d) That ACID SERVICES, LLC warrants only title to the products, supplies, and materials and that the same are free from defects in workmanship and materials. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED OF MERCHANTABILITY, FITNESS OR OTHERWISE WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Acid Services LLC's liability and Customer's exclusive remedy in and cause of action (whether in contract, tort, breach of warranty or otherwise) arising out of the sale or use of any products, supplies or materials is expressly limited to the replacement of such products, supplies or materials on their return to ACID SERVICES, LLC or, at ACID SERVICES, LLC's option, to the allowance to the Customer of credit for the cost of such items. In no event shall ACID SERVICES, LLC be liable for special, incidental, indirect, punitive or consequential damages.

e) To waive the provisions of the Deceptive Trade Practices - Consumer Protection Act, to the extent permitted by law. We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to service furnished under this contract.

f) That this contract shall be governed by the law of the state where services are performed or materials are furnished.

g) That ACID SERVICES, LLC shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized manager of ACID SERVICES, LLC.