

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 7160  
Name: Dave Wrestler  
Address 1: 1776 Georgia RD  
Address 2: \_\_\_\_\_  
City: Humboldt State: ks Zip: 66748 + \_\_\_\_\_  
Contact Person: Dave Wrestler  
Phone: ( 620 ) 423-8795  
CONTRACTOR: License # 33977  
Name: E.K. Energy LLC.  
Wellsite Geologist: none  
Purchaser: coffeville resource  
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, 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. \_\_\_\_\_ Conv. to SWD \_\_\_\_\_  
\_\_\_\_\_ Plug Back: \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
\_\_\_\_\_ Commingled \_\_\_\_\_ Docket No.: \_\_\_\_\_  
\_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No.: \_\_\_\_\_  
\_\_\_\_\_ Other (SWD or Enhr.?) \_\_\_\_\_ Docket No.: \_\_\_\_\_  
8-15-2008      8-19-2008      9-03-2008  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date                Recompletion Date

API No. 15 - 001-29728-0000  
Spot Description: \_\_\_\_\_  
SW ne ne nw Sec. 1 Twp. 26 S. R. 19  East  West  
495 Feet from  North /  South Line of Section  
2145 Feet from  East /  West Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
 NE  NW  SE  SW  
County: allen  
Lease Name: Loren Korte Well #: 12  
Field Name: Humboldt /Chanute  
Producing Formation: Cattleman  
Elevation: Ground: \_\_\_\_\_ Kelly Bushing: \_\_\_\_\_  
Total Depth: 779 Plug Back Total Depth: \_\_\_\_\_  
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: surface  
feet depth to: 779 w/ 95 sx cmt.  
Drilling Fluid Management Plan A1+ II ncr 1-27-09  
(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: Dave Wrestler  
Title: CO-owner Date: 11-21-08  
Subscribed and sworn to before me this 21<sup>st</sup> day of November  
20 08  
Notary Public: Susan E Cook  
Date Commission Expires: 2/6/12

**KCC Office Use ONLY**  
 Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
**RECEIVED**  
KANSAS CORPORATION COMMISSION

DEC 01 2008



Operator Name: Dave Wrestler Lease Name: Loren Korte Well #: 12  
 Sec. 1 Twp. 26 S. R. 19  East  West County: allen

**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 (Attach Additional Sheets)  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 (Submit Copy)  List All E. Logs Run: <b>Drillers LOG</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum  Cattleman <u>0' L SAND 760' 775' 15'</u>
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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	12"1/4	8"5/8		20	Portland		
Long String	5/5/8	2"7/8		765	Portland	95	

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

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____		Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr. <u>9/10/08</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 Bbbls. <u>12</u>	Gas Mcf	Water Bbbls. <u>8</u>
			Gas-Oil Ratio
			Gravity <u>32</u>

*Per telegraph  
w/ Dave  
12/18/08  
KCC  
me*

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	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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Start 8/15/08

021 20 078

Finish 8/19/08 (Raw Pipe)

Total Depth - 779'

Loran Korte #12

0-2 Soil

2-14 Lime

14-37 Shale

37-45 Lime

45-99 Shale

99-255 Lime

255-415 Shale

415-455 Lime

455-525 Shale

525-560 Lime

560-590 Shale

590-610 Lime

610-615 Lime

615-692 Shale

692-698 Lime

694-700 Shale

700-711 ~~Sand~~ Lime

711-760 Shale

760-775 sand

775-779 Shale

RECEIVED  
KANSAS CORPORATION COMMISSION

DEC 01 2008

CONSERVATION DIVISION  
WICHITA, KS

W & W Production Company

1150 Highway 39  
 Chanute, Kansas 66720-5215  
 Mobile: 620-431-5970  
 Phone: Office/Home 620-431-4137

# Invoice

DATE	INVOICE NO.
9/3/2008	43392

<b>BILL TO</b>
David Wrestler 1776 Georgia Rd. Humboldt, Ks. 66748

Well # <i>12</i> <i>LOREN KORTC</i> Allen County, Kansas
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SERVICED	ITEM	DESCRIPTION	QTY	RATE	AMOUNT
8/22/2008	Pump Truck Cement	Pump Charge New Well Pump Cement from top of packer to surface	1 95	2,000.00 0.00	2,000.00T 0.00
				RECEIVED KANSAS CORPORATION COMMISSION  <b>DEC 01 2008</b>  CONSERVATION DIVISION WICHITA, KS	
				<b>Sales Tax (6.3%)</b> \$126.00	
				<b>Total</b> \$2,126.00	

Fax #	Fed. I.D. 48-0843238
620-431-3183	carolwimsett4@yahoo.com