

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

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 3080
 Name: JACK EXPLORATION, INC.
 Address: P.O. BOX 1279
 City/State/Zip: SULPHUR, OK 73086
 Purchaser: _____
 Operator Contact Person: CLAYTON C. JACK
 Phone: (580) 622-2310
 Contractor: Name: DUKE DRILLING CO., INC.
 License: 5929
 Wellsite Geologist: MIKE POLLOCK
 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. _____

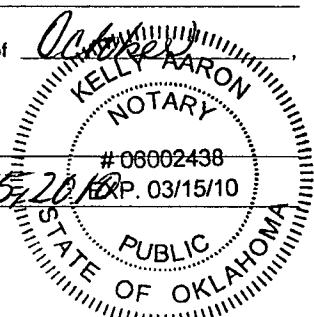
<u>11-04-2006</u>	<u>11-12-2006</u>	<u>07-10-2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-23091-0000
 County: BARBER CO, KS
W/2 NE _____ Sec. 22 Twp. 34 S. R. 13 East West
1320 feet from S / N (circle one) Line of Section
1980 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: ROSE Well #: 1-22
 Field Name: WILD CAT
 Producing Formation: DOLOMITE MISSISSIPPIAN
 Elevation: Ground: 1749 Kelly Bushing: 1762
 Total Depth: 4935 Plug Back Total Depth: 4896
 Amount of Surface Pipe Set and Cemented at 280 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/ API CDlg - 1/16/09 ^{sx cmt.}
Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit)
 Chloride content 4000 ppm Fluid volume _____ bbls
 Dewatering method used NO FLUIDS - 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: Clayton C. Jack
 Title: PRESIDENT Date: 10/31/2007
 Subscribed and sworn to before me this 31st day of October,
2007.
 Notary Public: Kelly Aaron
 Date Commission Expires: March 15, 2010



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 13 2007

Operator Name: JACK EXPLORATION, INC. Lease Name: ROSE Well #: 1-22
 Sec. 22 Twp. 34 S. R. 13 East West County: BARBER CO, KS

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 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:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum MICRO RESISTIVITY LOG COMPENSATED NEUTRON LOG
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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
CONDUCTOR	30"	20"		40'	GROUT	4 YDS	
SURFACE	17 1/2"	13 3/8"	48#	280'	CLASS A	250	3%cc 2%gel
PRODUCTION	7 7/8"	4 1/2"	11.6#	4935'	CLASS H	250	ASC w/ 5% FL-160, 1/4# FLO-SEAL

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 spf (14') 14 shots	LOWER MISS. 4808-4822	ACIDIZE w/ 1500 GAL 15% HCL NE/FE ACID w/ FR	

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. NONE-WAITING ON PIPELINE			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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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 _____

ALLIED CEMENTING CO., INC. 23896

Federal Tax I.D. _____

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
MED. LODGE

DATE <u>11-13-06</u>	SEC <u>22</u>	TWP <u>3 1/2</u>	RANGE <u>13W</u>	CALLED OUT <u>7:00 AM</u>	ON LOCATION <u>10:30 AM</u>	JOB START <u>2:30 PM</u>	JOB FINISH <u>3:30 PM</u>
LEASE <u>Rose</u>	WELL # <u>1-22</u>	LOCATION <u>HARDNER, 2 1/2 WEST, 3 1/2</u>			COUNTY <u>BARBER</u>	STATE <u>KANSAS</u>	
OLD OR NEW (Circle one)		NORTH, 1W, 1/2N, 1/4W, N/10					

CONTRACTOR DUKE #9

TYPE OF JOB PRODUCTION CASING

HOLE SIZE 7 7/8" T.D. 4935'

CASING SIZE 4 1/2" 11.6# DEPTH 4935'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1400# MINIMUM _____

MEAS. LINE _____ SHOE JOINT 20.06'

CEMENT LEFT IN CSG. _____

OWNER JACK EXPLORATION

CEMENT AMOUNT ORDERED

22.5 cu "H" ASC + 5# KOL-SEAL

+ 5% FL-160 + 1/4# FLO-SEAL

PERFS. _____

DISPLACEMENT 77 BBLs. WATER

COMMON _____	@ _____	_____	_____
POZMIX _____	@ _____	_____	_____
GEL _____	@ _____	_____	_____
CHLORIDE _____	@ _____	_____	_____
ASC "H" <u>22.5</u>	@ <u>15.15</u>	<u>3408.75</u>	
FL-160 <u>106#</u>	@ <u>10.65</u>	<u>1128.90</u>	
KOL-SEAL <u>1185#</u>	@ <u>.70</u>	<u>787.50</u>	
FLO-SEAL <u>56#</u>	@ <u>2.00</u>	<u>112.00</u>	

EQUIPMENT

PUMP TRUCK CEMENTER KEVIN B.

414-302 HELPER MARK B.

BULK TRUCK DRIVER JR. F.

363-250 DRIVER _____

BULK TRUCK DRIVER _____

_____ DRIVER _____

HANDLING <u>292</u>	@ <u>1.90</u>	<u>554.80</u>
MILEAGE <u>292 x 32</u>	@ <u>.09</u>	<u>262.80</u>
		TOTAL <u>632.91</u>

REMARKS:

Run 4 1/2" + CIRCULATE CASING

PUMP 5 BBLs. WATER

MIX 50% LEAD SURRY

MIX 17.5% TAIL SURRY

WASH PUMP + LINES

DISPLACE PLUG TO 4917' / 77 BBLs.

FLOAT DED HOLD.

SERVICE

DEPTH OF JOB <u>4935'</u>		
PUMP TRUCK CHARGE _____		<u>1750.00</u>
EXTRA FOOTAGE _____	@ _____	_____
MILEAGE <u>32</u>	@ <u>6.00</u>	<u>192.00</u>
MANIFOLD _____	@ _____	_____
<u>HEAD RENTAL</u>	@ <u>100.00</u>	<u>100.00</u>

CHARGE TO: JACK EXPLORATION

STREET RT 1, BOX 38A

CITY BREEDOU STATE OKLA ZIP 73842

RECEIVED
KANSAS CORPORATION COMMISSION
TOTAL 2042.00

NOV 13 2007

4 1/2" PLUG & FLOAT EQUIPMENT
CONSERVATION
WICHITA, KS

1-AFU FLOAT SHOE _____	@ <u>200.00</u>	<u>200.00</u>
1-LATCH DOWN PLUG _____	@ <u>325.00</u>	<u>325.00</u>
6-TURBOLIZERS _____	@ <u>55.00</u>	<u>330.00</u>

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

TOTAL 855.00

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE \$9729.91

DISCOUNT 972.99 IF PAID IN 30 DAYS

SIGNATURE Alan Watson

ALAN WATSON
PRINTED NAME

OK!
KA
well file