

ORIGINAL

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 # 31171
Name: CONTINENTAL OPERATING CO.
Address: 1221 MCKINNEY STE 3700
City/State/Zip: HOUSTON, TX 77010
Purchaser: CIMA ENERGY
Operator Contact Person: MEL SMITH
Phone: (713) 209-1110
Contractor: Name: WESTERN WELL SERVICING
License: 32128
Wellsite Geologist: _____

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: V D SIDNEY

Well Name: ECKERT #1

Original Comp. Date: 10/10/51 Original Total Depth: 3317'

____ 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. _____

5/22/06 6/7/06 9/1/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15-163-002940001
County: ROOKS
NW SE Sec. 5 Twp. 08 S. R. 17 East West
1980 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: ECKERT Well #: 1

Field Name: LONE STAR

Producing Formation: ARBUCKLE

Elevation: Ground: 1860' Kelly Bushing: _____

Total Depth: 3317' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 117' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 3316'

feet depth to SURFACE w/ 225 ^{sq cmt.}

Handwritten: AIZ-DG-1/8/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume 100 bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name: CONTINENTAL OPERATING CO.

Lease Name: STAMPER C License No.: 31171

Quarter _____ Sec. 32 Twp. 8 S. R. 17 East West

County: ROOKS Docket No.: E26, 843-0003

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: Mel Smith
MEL SMITH
Title: PROD. MGR. Date: 9/28/06

Subscribed and sworn to before me this 28th day of September, 2006.

Notary Public: Kelly J. Hall
Date Commission Expires: 5-12-09



KCC Office Use ONLY

Letter of Confidentiality Received **RECEIVED**

If Denied, Yes Date: OCT - 5 2006

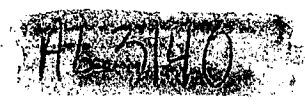
Wireline Log Received

Geologist Report Received

KCC WICHITA

KELLY J. HALL
Notary Public, State of Kansas
My Commission Expires 05-12-09

Allied Cementing Co., Inc
P.O. Box 31
Russell, KS 67665



* *
* I N V O I C E *
* *

Invoice Number: 102862

Invoice Date: 06/25/06

Sold Continental Operating Co.
To: P. O. Box 52
Hays, KS
67601

Cust I.D.....: ContOp
P.O. Number...: Eckert #1
P.O. Date.....: 06/25/06

Due Date.: 07/25/06
Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	135.00	SKS	10.6500	1437.75	T
Pozmix	90.00	SKS	5.8000	522.00	T
Gel	11.00	SKS	16.6500	183.15	T
CD-31	140.00	LBS	7.5000	1050.00	T
DeFoam	130.00	PER	7.2000	936.00	T
Handling	236.00	SKS	1.9000	448.40	T
Mileage	55.00	MILE	18.8800	1038.40	T
236 sks @ >08 per sk per mi					
Liner	1.00	JOB	955.0000	955.00	T
Mileage pmp trk	55.00	MILE	5.0000	275.00	T
Float Shoe	1.00	EACH	310.0000	310.00	T
TRP	1.00	EACH	55.0000	55.00	T

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 721.07
ONLY if paid within 30 days from Invoice Date

Subtotal: 7210.70
Tax.....: 382.17
Payments: 0.00
Total....: 7592.87

820/34 MS
2027138
Eckert #1
RWB 7-11-06
RECEIVED
OCT - 5 2006
KCC WICHITA

ALLIED CEMENTING CO., INC. 25152

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

SERVICE POINT: R

DATE <u>6/10/06</u>	SEC. <u>5</u>	TWP. <u>8</u>	RANGE <u>17</u>	CALLED OUT	ON LOCATION <u>8:30 A.M.</u>	JOB START	JOB FINISH <u>11:15 A.M.</u>
LEASE <u>ECKERT</u>	WELL # <u>1</u>	LOCATION <u>P. VILLE 600 TO R W</u>			COUNTY <u>ROCKS</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)		<u>to RD 20 N to RD N 1E 1N TWP</u>					

CONTRACTOR WESTERN
 TYPE OF JOB LENER
 HOLE SIZE _____ T.D. _____
 CASING SIZE 4 1/2" - 5 1/2" DEPTH 3314'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 52801

OWNER _____
 CEMENT
 AMOUNT ORDERED 225-00/100 600 GEL
3/4 of 190 CD-31
3/4 of 200 DEFAMER
 COMMON 135 @ 1065 143775
 POZMIX 90 @ 580 52200
 GEL 11 @ 1665 18315
 CHLORIDE _____ @ _____
 ASC _____ @ _____
LD-31 140 @ 750 105000
DEFAMER 130 @ 720 93600
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING 236 @ 190 44840
 MILEAGE 84 1/4 MILE 103840
 TOTAL 561570

REMARKS:

LENER @ 3314'. MIXED 22561
REPLACED PLUG W/ 52801.
PLUG DID NOT LAND. FLOAT HELD.
CEMENT DID NOT CURE.

CHARGE TO: CONTINENTAL
 STREET _____
 CITY _____ STATE _____ ZIP _____

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.

SIGNATURE Robert W. Benjamin

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 95500
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 55 @ 500 27500
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL 123000

PLUG & FLOAT EQUIPMENT

4 1/2 BLOKS @ _____ 31000
4 1/2 TRAP @ _____ 5500
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL 36500

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED

PRINTED NAME
OCT - 5 '06

KCC WICHITA