

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 33522
Name: bill gallagher enterprises llc
Address 1: _____
Address 2: _____
City: abilene State: tx Zip: 79806 + _____
Contact Person: dick clardy larry alex bill gallagher
Phone: (325) 6750515 913 7966763 949 5749258
CONTRACTOR: License # 5831
Name: mokat drilling
Wellsite Geologist: none
Purchaser: south eastern pipeline
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.: _____
9-23-08 9-26-08 9-26-08
Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - 205-27590-0000
Spot Description: _____
se nw ne ne Sec. 8 Twp. 29s S. R. 14 East West
440 Feet from North / South Line of Section
880 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: wilson county, ks
Lease Name: devins Well #: 8-9
Field Name: fredonia field
Producing Formation: new albany
Elevation: Ground: 855 Kelly Bushing: none
Total Depth: 661 Plug Back Total Depth: 646
Amount of Surface Pipe Set and Cemented at: 42 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 650
feet depth to: surface w/ 90

Drilling Fluid Management Plan
(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: ricks tank service
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: out of state 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: W. D. Galloway
Title: managing partner Date: 11-13-09
Subscribed and sworn to before me this _____ day of _____, 20____.
Notary Public: _____
Date Commission Expires: _____

SEE ATTACHED CALIFORNIA JURAT
SEE ATTACHED CALIFORNIA JURAT

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution
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Operator Name: bill gallagher enterprises llc Lease Name: devins Well #: 8-9
 Sec. 8 Twp. 29s S. R. 14 East West County: wilson county, 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 type="checkbox"/> Yes <input checked="" 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 <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>new albany sand</td> <td>248</td> <td></td> </tr> </table>	Name	Top	Datum	new albany sand	248	
Name	Top	Datum					
new albany sand	248						

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
case hole	6 3/4	41/2	9 1/2	646	class a cement	90	3%cal; 2% gel

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	248-251	15%acid	
2	272-276	15%acid	
2	282-285	15%acid	

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TUBING RECORD:	Size: <u>2 7/8</u>	Set At: <u>300</u>	Packer At: <u>none</u>	Liner Run: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		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: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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Jurat

State of California

County of Orange

Subscribed and sworn to (or affirmed) before me on this 13th day of November,
2009 by William J. Gallagher

proved to me on the basis of satisfactory evidence to be the person~~(s)~~ who appeared before me.

Felipa Chavez
Signature

(Notary seal)



OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

The wording of all Jurats completed in California after January 1, 2008 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiage by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one which does contain proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

DESCRIPTION OF THE ATTACHED DOCUMENT

Will Completion
(Title or description of attached document)

Jurat
(Title or description of attached document continued)

Number of Pages 2 Document Date 11/13/09

(Additional information)

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
 - ◊ Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
 - ◊ Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document

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CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-3210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 226047

Invoice Date: 09/29/2008 Terms: 0/30,n/30

Page 1

BILL GALLAGHER ENT. LLC
P.O. BOX 6174
ABILENE TX 79601
(325)675-0515

DEVINS 8-9
19484
09-26-08

Daisy

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	70.00	17.0000	1190.00
1110A	KOL SEAL (50# BAG)	350.00	.4200	147.00
1107A	PHENOSEAL (M) 40# BAG)	17.00	1.1500	19.55
1118A	S-5 GEL/ BENTONITE (50#)	200.00	.1700	34.00
4404	4 1/2" RUBBER PLUG	1.00	45.0000	45.00

Description	Hours	Unit Price	Total
463 CEMENT PUMP	1.00	925.00	925.00
463 EQUIPMENT MILEAGE (ONE WAY)	40.00	3.65	146.00
479 MIN. BULK DELIVERY	1.00	315.00	315.00

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9619.24
1317

Parts:	1435.55	Freight:	.00	Tax:	90.44	AR	2911.99
Labor:	.00	Misc:	.00	Total:	2911.99		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

8520
Pd ckr
1314
B&P
ENTERED



CONSOLIDATED
Oil Well Services, LLC

TICKET NUMBER 19484
LOCATION Edessa
FOREMAN Rex Leifer

PO Box 884, Chanute, KS 66720
820-431-8210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-26-08	3104	Devina 8-9				Wichita
CUSTOMER			TRUCK #			
Mailing Address			DRIVER			
CITY			TRUCK #			
STATE			DRIVER			
ZIP CODE						

Customer: Bill Gallagher
Mailing Address: P.O. Box 6124
City: Abilene State: Tx ZIP CODE: 79801
Job Type: Logging HOLE SIZE: 6 3/4" HOLE DEPTH: 661' CASING SIZE & WEIGHT: 4 1/2" 9.5"
Casing Depth: 6 1/2' DRILL PIPE: _____ TUBING: _____ OTHER: _____
Slurry Weight: 13.4" Slurry Vol: 21 bbl Water gal/sk: 8.0 CEMENT LEFT IN CASING: 0'
Displacement: 10.5 bbl Displacement PSI: 300 Rate PSI: 700

REMARKS: Safety meeting. Rig up to 4 1/2" casing. Break circulation w/ 15 bbl fresh water. Pump 4 sacks gel-flush, at 500 gal water spacer, 5 bbl dry water. Mixed 20 sacks thickest cement w/ 5" Kalsol #100 + 14" phoscol #100 @ 139 lb/sk. Workover pump + lines shut down release plug. Displace w/ 10.5 bbl fresh water. Final pump pressure 300 psi. Pump plug to 2nd bit. wait 2 mins release pressure. Flood hole. Good cement returns to surface. 5 bbl slurry to pit. Job complete. Rig down.

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	825.00	825.00
5406	40	MILEAGE	3.65	146.00
1126A	20 sacks	thickest cement	59.00	1180.00
1118A	350"	5" Kalsol #100	.42	147.00
1127A	17"	14" phoscol #100	1.15	19.55
1118A	200"	gel-flush	.17	34.00
5407	3"	trip-mileage bulk tax	n/a	315.00
4404	1	4 1/2" top collar plug	35.00	35.00
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			Subtotal	2221.55
			SALES TAX	64.44
			ESTIMATED TOTAL	2285.99

Rev'n 3/27

AUTHORIZATION called by Dave Edwards

TITLE Co. Sup

DATE _____

861924

10,455.70
836.46
9609.24



CONSOLIDATED
Oil Well Services, LLC

REMIT TO
Consolidated Oil Well Services, LLC
Dept. 970
P.O. Box 4346
Houston, TX 77210-4346

MAIN OFFICE
P.O. Box 884
Chanute, KS 66720
620/431-9210 • 1-800/467-8876
FAX 620/431-0012

INVOICE

Invoice # **225852**

Invoice Date: **09/23/2008** Terms: **0/30,n/30**

Page **1**

BILL GALLAGHER ENT. LLC
P.O. BOX 6174
ABILENE TX 79601
(325)675-0515

DEVINS 8-9
19437
09-20-08

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	90.00	13.5000	1215.00
1102	CALCIUM CHLORIDE (50#)	250.00	.7500	187.50
1118A	S-S GEL/ BENTONITE (50#)	170.00	.1700	28.90
1107	FLO-SEAL (25#)	22.00	2.1000	46.20

Description	Hours	Unit Price	Total
437 80 BBL VACUUM TRUCK (CEMENT)	2.50	100.00	250.00
485 CEMENT PUMP (SURFACE)	1.00	725.00	725.00
485 EQUIPMENT MILEAGE (ONE WAY)	.00	3.65	.00
515 MIN. BULK DELIVERY	1.00	315.00	315.00

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Parts:	1477.60	Freight:	.00	Tax:	93.09	AR	2860.69
Labor:	.00	Misc:	.00	Total:	2860.69		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____



CONSOLIDATED
Oil Field Services, LLC

ENTERED

TICKET NUMBER 19437
LOCATION Eureka
FOREMAN Steve Neal

PO Box 884, Chanute, KS 66720
620-431-8210 or 800-467-8878

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9.20.08	3124	Davis # 8-9	9	29	14E	Wichita
CUSTOMER			TRUCK #		DRIVER	
Bill Gallagher			485		Alan	
MAILING ADDRESS			515		Terrid	
P.O. Box 6174			477		Jim	
CITY		STATE	ZIP CODE			
Abline		Ks	79801			

JOB TYPE Surface HOLE SIZE 12 1/4 HOLE DEPTH 46' CASING SIZE & WEIGHT 8 1/2
 CASING DEPTH 43' DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15* SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT IN CASING _____
 DISPLACEMENT 2 1/2 bbl DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety meeting. Rig up to 8 1/2" casing. Wash 6' 8 1/2" casing to bottom. Mix 90 sks Class A Cement 3% coals & 2% gal. 4" flocculant. Displace with 2 1/2 bbl Freshwater. No cement to surface. Loss circulation during job. Job complete Rig down

Thank You

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE	725.00	725.00
4406	M/G	MILEAGE N/c To area		
11045	90 sks	Class A Cement	13.50	1215.00
1102	250*	Coals 3%	.75	187.50
1118A	170*	Gal 2%	.17	28.90
1107	22*	Flocculant 4 1/2" PULSK	2.10	46.20
5407		Ton mileage Bulk Truck	MIS	315.00
5302C	2 1/2 hrs	2 bbl Vacuum Trucks	110.00	275.00
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KCC WICHITA				
			Sub total	2767.60
			SALES TAX 6.3%	93.09
			ESTIMATED TOTAL	2860.69

Pavin 8737

AUTHORIZATION Called by Dave Fleming

8008800
TITLE Co. Rep.

DATE _____