

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: po box 6174  
Address 2: \_\_\_\_\_  
City: abilene State: tx Zip: 79806 + \_\_\_\_\_  
Contact Person: dick clardy larry alex bill gallagher  
Phone: ( 325 ) 6750515 913-7966763 949-574-9258  
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.: \_\_\_\_\_  
9-20-08 9-26-08 9-26-08  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 205-27591-0000  
Spot Description: \_\_\_\_\_  
nw se se ne Sec. 8 Twp. 29s S. R. 14  East  West  
2240 Feet from  North /  South Line of Section  
400 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 #: 8-10  
Field Name: fredonia field  
Producing Formation: new albany  
Elevation: Ground: 865 Kelly Bushing: NO  
Total Depth: 403 Plug Back Total Depth: 403  
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: 400  
feet depth to: surface w/ 90 11-13-09 sx cmt.

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content: 3% ppm Fluid volume: 80 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: Walter J. Gaddis  
Title: managing geologist 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**  
N Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
**RECEIVED**  
**NOV 17 2009**

KCC WICHITA

Operator Name: bill gallagher enterprises llc Lease Name: devins Well #: 8-10  
 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: none;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>new albany sand</td> <td>256-272</td> <td></td> </tr> </table> <div style="text-align: right; font-weight: bold; font-size: 1.2em; margin-top: 20px;">                 RECEIVED                  NOV 17 2009                  KCC WICHITA             </div>	Name	Top	Datum	new albany sand	256-272	
Name	Top	Datum					
new albany sand	256-272						

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	400	class a cement	45	3% calcium, 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 (Amount and Kind of Material Used)	Depth
2	256-261	15%acid	256-261
2	268-272	15%acid	268-272

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

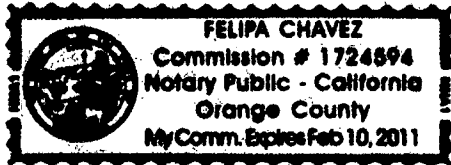
County of Orange

Subscribed and sworn to (or affirmed) before me on this 13<sup>th</sup> 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

### DESCRIPTION OF THE ATTACHED DOCUMENT

Well Completion

(Title or description of attached document)

FORM  
(Title or description of attached document continued)

Number of Pages 2 Document Date 11/13/09

(Additional 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.*

- 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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KCC WICHITA



**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 68720  
620/431-0210 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 226048

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 8-10  
19485  
09-26-08

Part Number	Description	Qty	Unit Price	Total
1126A	THICK SET CEMENT	45.00	17.0000	765.00
1110A	KOL SEAL (50# BAG)	225.00	.4200	94.50
1107A	PHENOSEAL (M) 40# BAG)	11.00	1.1500	12.65
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)	.00	3.65	.00
479	MIN. BULK DELIVERY	1.00	315.00	315.00

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Parts: 951.15 Freight: .00 Tax: 59.93 AR 2251.08  
 Labor: .00 Misc: .00 Total: 2251.08  
 Sublt: .00 Supplies: .00 Change: .00

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
615/338-0808

ELDRADO, KS  
315/322-7022

EURSKA, KS  
620/533-7864

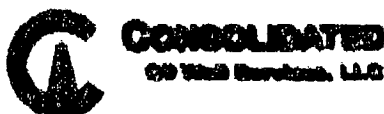
GILLETTE, WY  
307/688-4814

MCALISTER, OK  
018/426-7887

OTTAWA, KS  
785/242-4044

THAYER, KS  
620/633-5269

WORLD, WY  
307/347-4577



TICKET NUMBER 19485  
 LOCATION FURGER  
 FOREMAN Rick Lott

PO Box 884, Chanute, KS 66720  
 620-431-8210 or 800-467-8876

**FIELD TICKET & TREATMENT REPORT**  
**CEMENT**

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
9-26-08	3154	Devins 9-10				Wichita
CUSTOMER Bill Gallagher			GUS Jones			
MAILING ADDRESS P.O. Box 6124			TRUCK #	DRIVER	TRUCK #	DRIVER
CITY Abilene			463	Shannon		
STATE TX			479	John		
ZIP CODE 79801						

JOB TYPE Logging HOLE SIZE 6 3/4" HOLE DEPTH 411' CASING SIZE & WEIGHT 4 1/2" 9.5"  
 CASING DEPTH 903' DRILL PIPE \_\_\_\_\_ TUBING \_\_\_\_\_ OTHER \_\_\_\_\_  
 SLURRY WEIGHT 12.1" SLURRY VOL 14 bbl WATER gal/ft 8.0" CEMENT LEFT in CASING 0'  
 DISPLACEMENT 6 1/2 bbl DISPLACEMENT PSI 200 MIX PSI 600 RATE \_\_\_\_\_

REMARKS: Safety meeting- Rig up to 4 1/2" casing. Break circulation w/ 15 bbl fresh water. Pump 4 sacks gel-flush, 11 bbl water spacer. Mixed 45 sacks cement consist w/ 5" Kel-sol<sup>TM</sup> 200 + 4 1/2" phoscol<sup>TM</sup> 200 @ 13.1" w/ 1000 sand down. release plug. Output w/ 6 1/2 bbl fresh water. Final pump pressure 200 PSI. Pump plug to 600 PSI. Wait 2 minutes, release pressure. Shut hole. Good cement returns to surface = 5 bbl slurry to pit. Job complet. Rig down.

"Thank You"

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE	925.00	925.00
5406	2	MIILEAGE 200 well of 2	0.16	0.32
1186A	45 sacks	thickent cement	17.00	765.00
1110A	225"	5" Kel-sol <sup>TM</sup> 200	.42	94.50
1127A	11"	4 1/2" phoscol <sup>TM</sup> 200	1.15	12.65
1118A	200"	gel-flush	.17	34.00
5407	2.5	concrete bulk tank	0.16	0.40
4124	1	4 1/2" top outlet plug	45.00	45.00
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			SUBTOTAL	2191.15
			SALES TAX	09.93
			ESTIMATED TOTAL	8201.08

Form 6727

306 048

AUTHORIZATION Called by One Pump

TITLE CC

DATE:



**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 • 1-800/467-8676  
FAX 620/431-0012

INVOICE

Invoice # 225916

Invoice Date: 09/24/2008 Terms: 0/30,n/30

Page 1

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

DEVINS 8-10  
19458  
09-23-08

Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	60.00	13.5000	810.00
1102	CALCIUM CHLORIDE (50#)	165.00	.7500	123.75
1118A	S-S GEL/ BENTONITE (50#)	110.00	.1700	18.70
1107	FLO-SEAL (25#)	15.00	2.1000	31.50
	Description	Hours	Unit Price	Total
436	80 BBL VACUUM TRUCK (CEMENT)	2.00	100.00	200.00
479	MIN. BULK DELIVERY	1.00	315.00	315.00
485	CEMENT PUMP (SURFACE)	1.00	725.00	725.00
485	EQUIPMENT MILEAGE (ONE WAY)	40.00	3.65	146.00

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Parts:	983.95	Freight:	.00	Tax:	61.99	AR	2431.94
Labor:	.00	Misc:	.00	Total:	2431.94		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed \_\_\_\_\_

Date \_\_\_\_\_

BARTLESVILLE, OK  
918/338-0908

ELDORADO, KS  
316/322-7022

EUREKA, KS  
620/583-7664

GILLETTE, WY  
307/856-4914

MCALISTER, OK  
918/426-7667

OTTAWA, KS  
765/242-4044

THAYER, KS  
620/839-5289

WORLD, WY  
307/747-4677

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