

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

15-133-01783-00-00

Operator: License # 31751
Name: John E Galemore
Address: PO Box 151
City/State/Zip: Chanute, KS 66720
Purchaser: Plains
Operator Contact Person: same
Phone: (918) 629-1776
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

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KANSAS CORPORATION COMMISSION
JUL 16 2008
CONSERVATION DIVISION
WICHITA, KS

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: #31

Original Comp. Date: NA Original Total Depth: 703
____ 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. _____

Spud Date or _____ Date Reached TD _____ Completion Date or _____
Recompletion Date _____ Recompletion Date _____

API No. 15 - Old Well that was not completed

County: Neosho
W2 W2 SE4 Sec. 29 Twp. 27 S. R. 19 East West

1270 1626 feet from 9 / N (circle one) Line of Section
2210 1756 feet from 3 / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Beale Well #: 31

Field Name: Humboldt-Chanute

Producing Formation: Cattleman

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: 705 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at NA 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 705 w/ _____ sx cmt.

Drilling Fluid Management Plan AH II SB 12/14/09
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm **RECEIVED KCC DISTRICT #3** bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: **JUL 10 2008**

Operator Name: CHANUTE, KS

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: John E Galemore

Title: Operator Date: July 2008

Subscribed and sworn to before me this 8th day of July

2008

Notary Public: Selene D Hummer

Date Commission Expires: May 20, 2009

SELENE D. HUMMER
Notary Public - State of Kansas
My Appt. Expires May 20, 2009

KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes Date: _____

Wireline Log Received

____ Geologist Report Received

____ UIC Distribution

Operator Name: John E Galemore Lease Name: Beale Well #: 31
 Sec. 29 Twp. 27 S. R. 19 East West County: Neosho

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input 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 type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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
surface	8 5/8	8 7/8					
long string	5 1/2	2 7/8		703	Portland		

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 per foot	678-684	13 perts	Portland Cement

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TUBING RECORD		Size	Set At	Packer At	Liner Run	CONSERVATION DIVISION WICHITA, KS	
		2 7/8	703		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumerd Production, SWD or Enhr.		Producing Method					
5/23/08		<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		
	2		Nil				

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____

PAYLESS CONCRETE PRODUCTS, INC.

P.O. BOX 664
 802 N. INDUSTRIAL RD.
 IOLA, KS 66749

Voice: 620-365-5588
 Fax:

INVOICE

Invoice Number: 20582
 Invoice Date: May 12, 2008
 Page: 1
 Duplicate

Bill To:
 CASH FOR C.O.D.'S
 802 N. INDUSTRIAL RD.
 IOLA, KS 66749

Ship to:
 J V OIL
 P.O. BOX 151
 CHANUTE, KS 66720

Customer ID	Customer PO	Payment Terms	
CASH/C.O.D.	N. WELL 317	C.O.D.	
Sales Rep ID	Shipping Method	Ship Date	Due Date
	TRUCK		5/12/08

Quantity	Item	Description	Unit Price	Amount
80.00	CEMENT/WATER	CEMENT & WATER PER BAG MIX	6.90	552.00
3.25	TRUCKING	TRUCKING CHARGE	50.00	162.50

RECEIVED
 KCC DISTRICT #3
 JUL 10 2008
 CHANUTE, KS

RECEIVED
 KANSAS CORPORATION COMMISSION
 JUL 16 2008
 CONSERVATION DIVISION
 WICHITA, KS

Subtotal	714.50
Sales Tax	45.01
Total Invoice Amount	759.51
Payment/Credit Applied	
TOTAL	759.51

Check/Credit Memo No: