

MAR 04 2009

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

CONSERVATION DIVISION
WICHITA, KS

Form ACO-1
October 2008
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 32628
 Name: Quantum Operating Company
 Address 1: PO Box 3029
 Address 2: _____
 City: Denver State: CO Zip: 80201 + _____
 Contact Person: EUGENE NICHOLS
 Phone: (720) 488 4942
 CONTRACTOR: License # _____
 Name: _____
 Wellsite Geologist: _____
 Purchaser: _____
 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.)

API No. 15 - 039 - 20471 0002
 Spot Description: C N/2 SW
NE NW SW Sec. 7 Twp. 1 S. R. 26 East West
2075 Feet from North / South Line of Section
4056 Feet from East / West Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
 County: DECATUR
 Lease Name: Atherton Well #: 7
 Field Name: BLEES
 Producing Formation: Lansing Kansas City
 Elevation: Ground: 2471 Kelly Bushing: 2475
 Total Depth: 3558 Plug Back Total Depth: 3327
 Amount of Surface Pipe Set and Cemented at: 275 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/ _____ sx cmt.

If Workover/Re-entry: Old Well Info as follows:
 Operator: Vera Cruz Petroleum SAME AS ABOVE
 Well Name: Atherton No. 7
 Original Comp. Date: 12-1-79 2/06/06 Original Total Depth: 3558
 _____ Deepening _____ Re-perf. _____ Conv. to Enhr. _____ Conv. to SWD
 _____ Plug Back: 3558 Plug Back Total Depth _____
 _____ Commingled _____ Docket No.: _____
 _____ Dual Completion _____ Docket No.: _____
 _____ Other (SWD or Enhr.?) _____ Docket No.: 9/16/08
10-24-79 11-3-79 12-1-79
 Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan WON 12/18/09
 (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: _____
 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: _____
 Title: PRESIDENT Date: February 26, 2009
 Subscribed and sworn to before me this 27th day of February, 2009.
 Notary Public: [Signature]
 Date Commission Expires: 4/23/2012

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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CONSERVATION DIVISION
WICHITA, KS

Side Two

Operator Name: Quantum Operating Company Lease Name: Atherton Well #: 7
Sec. 7 Twp. 1 S. R. 26 East West County: DECATUR

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 Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy)

List All E. Logs Run: *(Equip. Log run - not done with the inkover)*
RA Guard Log

Log Formation (Top), Depth and Datum Sample

Name Top Datum
Lansing Kansas City 3246 -771

Reagan 3552 -1083

CASING RECORD New 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	30	275		225	
Production		4 1/2	9.5	3551		150	

EXISTING CASING

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
Plug Off Zone				

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

Shots Per Foot	Original OH 3551-58		
	Now perf 3248-50 and 3288 -90 (PERFS FROM '01 RECORD)		

TUBING RECORD: Size: 2 3/8 Set At: 3292 Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or Enhr. 9-16-2008 Producing Method: Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
	3		40		30

DISPOSITION OF GAS:	METHOD OF COMPLETION:	PRODUCTION INTERVAL:
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input checked="" type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

RECEIVED
KANSAS CORPORATION COMMISSION

Quantum Operating Company
P.O. Box 3029
Denver, CO 80201

MAR 04 2009

CONSERVATION COMMISSION
WICHITA, KS

Kansas Corporation Commission
Conservation Division
130 S. Market, Room 2078
Wichita, KS 67202

RE: Well Completion Form and Notice of Injection Commencement or Termination Form

To Whom-It May Concern:

Please find the following signed forms for the Atherton # 7, Decatur County, KS enclosed:

Well Completion Form (Form ACO-1)

sent to WIC 2/09/09 Notice of Injection Commencement or Termination Form (Form U-5)

If you have any questions, please contact Garry Nollen at 720-488-4942.

Thank You,

Quantum Operating Company

Enclosure (3)