

CONFIDENTIAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

440309
Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5010
Name: Knighton Oil Company, Inc.
Address: 1700 N. Waterfront Parkway, Suite 100, Bldg. A
City/State/Zip: Wichita, Kansas 67206
Purchaser: _____
Operator Contact Person: Earl M. Knighton, Jr.
Phone: (316) 630-9905
Contractor: Name: Gulick Drilling Company, Inc.
License: 32854
Wellsite Geologist: Dave Montague

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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: _____
Original Comp. Date: _____ Original Total Depth: _____
 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. _____

10/29/07	11/4/07	11/4/07
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 127-20578-0000
County: Morris
C N/2 N/2 NE Sec. 26 Twp. 16 S. R. 9 East West
320 4950 feet from S NE (circle one) Line of Section
1320 1320 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Dale Williams Well #: 1
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 1251 Kelly Bushing: 1259
Total Depth: 2986 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 201 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.

Drilling Fluid Management Plan: PANS 3-16-09
(Data must be collected from the Reservoir)
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: Dave Montague
Title: Geologist (Dave Montague) Date: 11/6/07
Subscribed and sworn to before me this 13th day of November,
2007.
Notary Public: Judy C. Ridder
Date Commission Expires: June 16, 2008

JUDY C. RIDDER
Notary Public - State of Kansas
My Appt. Expires 6/16/08

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes No Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

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WICHITA, KS

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Operator Name: Knighton Oil Company, Inc. Lease Name: Dale Williams Well #: _____
 Sec. 26 Twp. 16 S. R. 9 East West County: Morris

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:

DST No.1, 2969-2974, 15-30-15-30, weak surface
 blow died, recovered 5' OCM, BHP 722-914, FP
 43-40: 45-40, BHT 106

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Heebner	1108	+151
Lansing	1399	-140
Base Kansas City	1782	-252
Mississippian	2385	-1126
Hunton	2853	-1594
Viola	2969	-1710

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	12 1/4"	8 5/8"	23#	201'	common	100	2%gel/3%cc

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
			<input type="checkbox"/> Flowing <input 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 Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

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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
620/431-9210 • 1-800/467-8676
FAX 620/431-0012

INVOICE

Invoice # 218012

Invoice Date: 11/07/2007 Terms:

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KNIGHTON OIL CO
221 S. BROADWAY, SUITE 710
WICHITA KS 67202
(316)264-7918

DALE WILLIAMS #1
13173
11-04-07

Part Number	Description	Qty	Unit Price	Total
1131	60/40 POZ MIX	75.00	9.8000	735.00
1118A	S-5 GEL/ BENTONITE (50#)	258.00	.1500	38.70
Description		Hours	Unit Price	Total
485	P & A NEW WELL	1.00	840.00	840.00
485	EQUIPMENT MILEAGE (ONE WAY)	75.00	3.30	247.50
502	TON MILEAGE DELIVERY	240.00	1.10	264.00

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Parts:	773.70	Freight:	.00	Tax:	48.75	AR	2173.95
Labor:	.00	Misc:	.00	Total:	2173.95		
Sublt:	.00	Supplies:	.00	Change:	.00		

Signed _____ Date _____

CONSOLIDATED OIL WELL SERVICES,
P.O. BOX 884, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

TICKET NUMBER 13173
LOCATION Eureka
FOREMAN Steve Reed

TREATMENT REPORT & FIELD TICKET
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-4-07	4495	Dale Williams #1	26	165	96	Wichita
CUSTOMER			Gulick Drig.			
MAILING ADDRESS			TRUCK #	DRIVER	TRUCK #	DRIVER
1700 N. Waterfront Parkway Bldg 200 Site A			485	Alan		
CITY	STATE	ZIP CODE	502	Heath		
Wichita	Ks	67206				

JOB TYPE PTD HOLE SIZE 9 7/8 HOLE DEPTH _____ CASING SIZE & WEIGHT _____
CASING DEPTH _____ DRILL PIPE _____ TUBING _____ OTHER _____
SLURRY WEIGHT _____ SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
DISPLACEMENT _____ DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Safety Meeting: Plug well as follows
35 SKS AT 250'
25 SKS AT 60' TO SURFACE
15 SKS in Rat Hole
Total 75 SKS 64/100 Poz mix Cement 4% Gel
Job Complete Rig down

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Thank you

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5405N	1	PUMP CHARGE	840.00	840.00
5406	75	MILEAGE	2.70	202.50
1131	75 SKS	64/100 Poz mix Cement	9.50	712.50
1118A	258'	Gel 4%	.15	38.70
5407A	3.2 Tons	Ton mileage Bulk Truck 7 miles	1.10	352.00
				Sub Total 2125.20
				SALES TAX 42.78
				ESTIMATED TOTAL 2173.98

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WICHITA, KS

218012

AUTHORIZATION Called by Ron Gulick TITLE Tank Packer DATE _____
2173.95



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 # 217818

Invoice Date: 10/31/2007 Terms:

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KNIGHTON OIL CO
221 S. BROADWAY, SUITE 710
WICHITA KS 67202
(316)264-7918

WILLIAMS, DALE #1
13112
10-29-07

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Part Number	Description	Qty	Unit Price	Total
1104S	CLASS "A" CEMENT (SALE)	100.00	12.2000	1220.00
1102	CALCIUM CHLORIDE (50#)	300.00	.6700	201.00
1118A	S-5 GEL/ BENTONITE (50#)	200.00	.1500	30.00
1107	FLO-SEAL (25#)	50.00	1.9000	95.00

Description	Hours	Unit Price	Total
445 CEMENT PUMP (SURFACE)	1.00	650.00	650.00
445 EQUIPMENT MILEAGE (ONE WAY)	75.00	3.30	247.50
479 TON MILEAGE DELIVERY	352.50	1.10	387.75

*CEMENT SURFACE
CASING*

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Parts:	1546.00	Freight:	.00	Tax:	97.40	AR	2928.65
Labor:	.00	Misc:	.00	Total:	2928.65		
Sublt:	.00	Supplies:	.00	Change:	.00		

WELL FILE

Signed _____ Date _____

CONSOLIDATED OIL WELL SERVICES, LLC
 P.O. BOX 884, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 13112
 LOCATION EUREKA
 FOREMAN KEVIN MCCOY

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
10-29-07	4495	Dale Williams # 1	26	165	9E	ANDERS
CUSTOMER Knighton Oil Company, Inc. Mailing Address 1700 N. Waterfront Parkway Bldg 100 Ste A Wichita KS 67206			Gulick Delg.			
CITY STATE ZIP CODE			TRUCK #	DRIVER	TRUCK #	DRIVER
			445	Justin		
			479	Shannon		

JOB TYPE SURFACE HOLE SIZE 12 1/4" HOLE DEPTH 214' KB CASING SIZE & WEIGHT 8 1/2" 23"
 CASING DEPTH 211' KB DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15 # SLURRY VOL 24 BBL WATER gal/sk 6.5 CEMENT LEFT in CASING 20'
 DISPLACEMENT 12 BBL DISPLACEMENT PSI 200 MIX PSI _____ RATE _____

REMARKS: SAFETY Meeting: Rig up to 8 5/8 casing. BREAK CIRCULATION w/ 12 BBL
Fresh water. Pump 5 BBL dye water. MIXED 100 SKS CLASS "A" Cement w/ 3%
CACL2 2% GEL, 1/2" floccle per/sk @ 15" pcc/gal yield 1.35. Displace w/ 12
BBL fresh water. Shut casing in. Good Cement Returns to Surface = 3 BBL
Slurry to Pit. Job Complete. Rig down

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ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401 S	1	PUMP CHARGE	650.00	650.00
5406	75	MILEAGE	3.30	247.50
1104 S	100 SKS	CLASS "A" Cement	12.20	1220.00
1102	300 #	CACL2 3%	.67 #	201.00
1118 A	200 #	GEL 2%	.15 #	30.00
1107	50 #	Floccle 1/2" per/sk	1.90 #	95.00
5407 A	4.7 TONS	75 miles BULK TRUCK	1.10	517.75
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			Sub Total	2988.25
			SALES TAX 6.3%	99.90
			ESTIMATED TOTAL	3088.15

AUTHORIZATION Witnessed By Ron Gulick TITLE Contractor / Gulick Delg. DATE _____
 Thank You 217818

WELL FILE 2928.65