

CONFIDENTIAL

ORIGINAL

2/23/10

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 # 30129
Name: EAGLE CREEK CORPORATION
Address 1: 150 N. MAIN SUITE 905
Address 2: _____
City: WICHITA State: KS Zip: 67202 + _____
Contact Person: DAVE CALLEWAERT

Phone: (316) 264-8044
CONTRACTOR: License # 4072
Name: H2 PLAINS **CONFIDENTIAL**
Wellsite Geologist: DAVE CALLEWAERT **FEB 28 2009**
Purchaser: ONEOK GAS MARKETING **KCC**

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: EAGLE CREEK CORPORATION
Well Name: CURTIS 1-23
Original Comp. Date: 01-04-2007 Original Total Depth: 4462
____ Deepening Re-perf. ____ Conv. to Enhr. ____ Conv. to SWD
 Plug Back: 4120 Plug Back Total Depth: _____
____ Commingled ____ Docket No.: _____
____ Dual Completion ____ Docket No.: _____
____ Other (SWD or Enhr.?) ____ Docket No.: _____
01-13-2009 01-13-2009 01-14-2009
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 151-22252-0001
Spot Description: _____
APPR. W/2 - SW - Sec. 23 Twp. 26 S. R. 15 East West
1320 Feet from North / South Line of Section
760 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: PRATT

Lease Name: CURTIS Well #: 1-23
Field Name: TATLOCK NORTHEAST
Producing Formation: KANSAS CITY "I" ZONE
Elevation: Ground: 2052 Kelly Bushing: 2060
Total Depth: 4462 Plug Back Total Depth: 4120
Amount of Surface Pipe Set and Cemented at: 459 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 WON 7-1309
(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: [Signature]
Title: PRESIDENT Date: 2-23-2009

Subscribed and sworn to before me this 23rd day of February, 2009.

Notary Public: Deborah R. Haddock
Deborah R. Haddock
Date Commission Expires: 9/28/09

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
KANSAS CORPORATION COMMISSION

DEBORAH R. HADDOCK
NOTARY PUBLIC
STATE OF KANSAS
2/23/09

FEB 24 2009
CONSERVATION DIVISION
WICHITA KS

ORIGINAL

Side Two

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Operator Name: EAGLE CREEK CORPORATION Lease Name: CURTIS Well #: 1-23
Sec. 23 Twp. 26 S. R. 15 East West County: PRATT

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:
ALL LOGS AND DST'S SENT WITH ORIGINAL ACO-1

Log Formation (Top), Depth and Datum 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	12.25"	8.625"	23#/FT	459 KB	LIGHT AND 60/40 POZ	265	3% CC AND CELL FLAKE
PRODUCTION	7.875"	4.5"	10.5#/FT	4458	AA2	200	10% SALT, 5# GILS/SK 25% DEFOAMER, .8% FLA322

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				

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
	SET BRIDGE PLUG AT 4120		
4 SHOTS/FT	4066-4070	ACIDIZED W/ 1000 GALLONS 15% nefe	

TUBING RECORD: Size: <u>2.375"</u> Set At: <u>4069</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. <u>01-14-2009</u>	Producing Method: <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls. <u>886</u> Gas Mcf <u>0</u> Water Bbls. <u>0</u> Gas-Oil Ratio <u>0</u> Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	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: <u>4066-4070</u>
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Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202