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AUG 20 2010

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
June 2009

KCC WICHITA Form Must Be Typed
Form must be Signed
All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

OPERATOR: License # 32887
Name: Endeavor Energy Resources, LP
Address 1: PO Box 40
Address 2: _____
City: Delaware State: OK Zip: 74027 + _____
Contact Person: Joe Driskill
Phone: (918) 467-3111
CONTRACTOR: License # 33072
Name: Well Refined Drilling
Wellsite Geologist: NA
Purchaser: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil WSW SWD SLOW
 Gas D&A ENHR SIGW
 OG GSW Temp. Abd.
 CM (Coal Bed Methane)
 Cathodic Other (Cora, Expl., 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
 Conv. to GSW
 Plug Back: _____ Plug Back Total Depth _____
 Commingled Permit #: _____
 Dual Completion Permit #: _____
 SWD Permit #: _____
 ENHR Permit #: _____
 GSW Permit #: _____
6-11-10 6-21-10
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 125-31963-00-00
Spot Description: _____
NE NE NE Sec. 14 Twp. 34 S. R. 16 East West
330 Feet from North / South Line of Section
330 Feet from East / West Line of Section
Footages Calculated from Nearest Outside Section Corner:
 NE NW SE SW
County: Montgomery
Lease Name: Campbell Well #: 14-5
Field Name: Unnamed
Producing Formation: _____
Elevation: Ground: 725' Kelly Bushing: _____
Total Depth: 1028' Plug Back Total Depth: 1023'
Amount of Surface Pipe Set and Cemented at: 68' 7" Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set: _____ Feet
If Alternate II completion, cement circulated from: 68' 7"
feet depth to: surface w/ 50 sx cmt.

Drilling Fluid Management Plan
(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 #: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Permit #: _____

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.

AFFIDAVIT

I am the affiant and I hereby certify that 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: Joe Driskill
Title: Operations Superintendent Date: 8-17-10

KCC Office Use ONLY

Letter of Confidentiality Received
Date: _____
 Confidential Release Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
ALT I II III Approved by: Dg Date: 8/23/10

Operator Name: Endeavor Energy Resources, LP Lease Name: Campbell Well #: 14-5
 Sec. 14 Twp. 34 S. R. 16 East West County: Montgomery

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 complete copy of all Electric Wire-line 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 type="checkbox"/> Yes <input checked="" 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 Electric Log Submitted Electronically <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: High Resolution Density Dual Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Mississippi Lime 981 <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED AUG 20 2010 KCC WICHITA </div>
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CASING RECORD <input 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"	24#	68' 7"	Class A	50	
Production	7 7/8"	5 1/2"	15.5	1023'	Thick Set	135	

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

TUBING RECORD: Size: Set At: Packer At: Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. **Not complete** Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input 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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
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KCC WICHITA

Well Refined Drilling Company, Inc.

4230 Douglas Road - Thayer, KS 66776

Contractor License # 33072

620-839-5581/Office; 620-432-6170/Jeff Cell; 620-839-5582/FAX

Rig #:	2	Lic # 32887	S14	T34S	R16E
API #:	15-125-31963-0000		Location	NE,NE,NE	
Operator:	Endeavor Energy Resources LP		County	Montgomery	
Address:	PO Box 40				

HAVE RIG
Rig # 2
WILL DIG

				Gas Tests			
Well #:	14-5	Lease Name:	Campbell	Depth	Qz	Office	flow MCF
Location:	330	FNL	Line	203			No Flow
	330	FEL	Line	303			No Flow
Spud Date:	6/11/2010			403			No Flow
Date Completed:	6/21/2010			TD: 1028			No Flow
Driller:	Jeff Kephart			503	3 1/2	1"	47.6
Casing Record	Surface	Production		530	6	1"	65.3
Hole Size	12 1/4"		7 7/8"	753	4.5	1 1/4"	93.1
Casing Size	8 5/8"			803	4	1"	51.6
Weight				978	5	1"	57.7
Setting Depth	68' 7"			1028	Gas Check Same		
Cement Type	Portland						
Sacks	Consolidated						
Feet of Casing							

Note:

10LF-062110-R2-031-Campbell-14-5-Endeavor Energy Resources LP

Well Log

Top	Bottom	Formation	Top	Bottom	Formation	Top	Bottom	Formation
0	4	overburden	201	203	sand	511	522	lime
4	35	clay	203	214	shale	522	534	shale
35	40	gravel	214	250	sand	534	535	coal
40	88	shale	250	330	sandy shale	535	540	shale
88	89	coal	330	332	lime	540	535	coal
89	95	shale	332	337	shale	535	540	shale
95	101	lime	337	355	lime	540	550	sand
101	103	shale	355	402	shale	550	551	shale
103	120	sand	402	403	sand	551	552	coal
120	162	shale	403	413	sandy shale	552	554	sand
162	163	coal	413	428	sand	554	561	shale
163	165	shale			bottom - wet	561	563	lime
165	172	lime	428	433	sandy shale	563	606	shale
172	174	shale			added water	606	607	coal
174	175	coal	433	470	lime	607	621	shale
175	177	shale	470	474	shale	621	622	coal
177	188	lime	474	505	lime	622	650	shale
188	201	shale	505	511	blk shale	650	657	sand



CONSOLIDATED
Oil Well Services, LLC

234851

TICKET NUMBER 27648

LOCATION Berkeley

FOREMAN Jason Bell

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-22-10	2520	Campbell 145				DEW
CUSTOMER <u>Endover</u>						
MAILING ADDRESS						
CITY						
STATE						
ZIP CODE						
TRUCK #	DRIVER	TRUCK #	DRIVER			
492	Tom					
551	Eric					
	Harvey TP					

JOB TYPE L.S. HOLE SIZE 7 7/8 HOLE DEPTH 1028 CASING SIZE & WEIGHT 5 1/2 15.5
 CASING DEPTH 1023 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 13.7 SLURRY VOL _____ WATER gal/sk _____ CEMENT LEFT in CASING _____
 DISPLACEMENT 24.3 DISPLACEMENT PSI _____ MIX PSI _____ RATE _____

REMARKS: Ran sl established circulation. Ran 135 sbs thickset cement. Shut down and made up behind plug. Dropped plug displaced to bottom. They held locked hose and worked up.
Cement circulated to bottom

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE		900.00
5406	45	MILEAGE		159.75
5407	1	bulk truck		305.00
5402	1023	footage		204.60
5501c	4.5	transport		486.00
1126A	135 sbs	Thickset		2227.50
1107A	800#	Pheno		89.60
1110A	700#	Kol seal	RECEIVED	280.00
1118b	200#	Fiel	AUG 20 2010	40.00
1123	5040 gal	City Water		23.08
4406	1	Stimulox Plug	KCC WICHITA	60.00
		1023 disc and if paid in 30 days = 497.24		
		4475.11		

Ravin 3737

5.3 SALES TAX ESTIMATED TOTAL 4972.35

AUTHORIZATION _____ TITLE _____ DATE 4972.35
 I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.



CONSOLIDATED
Oil Well Services, LLC

#234702

TICKET NUMBER 27631
LOCATION BARTLESVILLE, OK
FOREMAN Donnie Tate

PO Box 884, Chanute, KS 66720
620-431-9210 or 800-467-8676

FIELD TICKET & TREATMENT REPORT
CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
6-11-10	2526	Campbell #14-5				Mont. KS
CUSTOMER			TRUCK #			
ENDEAVOR			419	JAMES N		
MAILING ADDRESS			551	JAMES C		
CITY			TP	Nunnley		
STATE						
ZIP CODE						

JOB TYPE M/SURF HOLE SIZE 12 1/4 HOLE DEPTH _____ CASING SIZE & WEIGHT 8 5/8 24"
 CASING DEPTH 68.7 DRILL PIPE _____ TUBING _____ OTHER _____
 SLURRY WEIGHT 15.6 SLURRY VOL 1.18 WATER gal/sk 5.2 CEMENT LEFT in CASING 15'
 DISPLACEMENT 3.4 DISPLACEMENT PSI 200* MIX PSI 200* RATE 4/6

REMARKS: MUD PUMP HOLE, GEL, - RUN 50SX 2% CAL - DISPLACEMENT 3.4 LEAVING
APPROX 15' in CASING - SHUT IN - WASH UP, RACK UP
CMT TO SURF.

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
54015	1	PUMP CHARGE		
5406	43	MILEAGE		700.00
5407	1	BULK TRUCK		152.65
5501C	6 YHR	TRANSPORT		350.00
5609	4 YHR	Misc Pump		648.00
				780.00
1104	50sx / 4700'	CLASS A CMT		
1102	15x / 80'	CALCIUM		705.00
1118B	10sx / 500'	GEL		58.40
1123	5460 GALS.	CITY WATER		100.00
				79.17
10%	Discount if Paid			
	WITHIN 10 Days			
Total	3623.18			
Disc.	362.32			
Total	\$3260.86			

Thank you

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KCC WICHITA

5.3% SALES TAX 49.97
ESTIMATED TOTAL \$3623.19

AUTHORIZATION

TITLE _____ DATE _____

I acknowledge that the payment terms, unless specifically amended in writing on the front of the form or in the customer's account records, at our office, and conditions of service on the back of this form are in effect for services identified on this form.