

ORIGINAL

Side Two

Operator Name: RAYMOND OIL COMPANY, INC.

Lease Name: HOGAN

Well #:

Sec. 22 Twp. 20 S. R. 29 East West

County: LANE

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:

Sonic
Dual Inducion
Micro
Density/Neutron

| Name | Formation (Top), Depth and Datum | |
|-------------|----------------------------------|-------|
| | Top | Datum |
| Anhydrite | 2144 | +720 |
| Heebner Sh | 4008 | -1154 |
| Lansing | 4048 | -1194 |
| Stark Sh | 4331 | -1477 |
| Cher Sh | 4604 | -1750 |
| Miss | 4674 | -1788 |
| Total Depth | 4809 | |

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 | 12 1/4" | 8 5/8" | 24# | 257' | COMMON | 175 | 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 Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| | | | |
| | | | |
| | | | |
| | | | |

| | | | | |
|---------------|------|--------|-----------|---|
| TUBING RECORD | Size | Set At | Packer At | Liner Run <input checked="" 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 Pert. Dually Comp. Commingled Other (Specify)

Production Interval

RAYMOND OIL COMPANY, INC.

P. O. BOX 48788

245 N Waco, SUITE 501

TELEPHONE 316-267-4214

WICHITA, KANSAS 67201-8788

November 4, 2008

Kansas Corporation Commission
130 S Market, Rm 2078
Wichita, KS 67202-3802

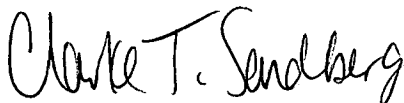
KCC
NOV 04 2008
CONFIDENTIAL

Re: Confidentially on the # 1 Hogan
Section 22-20S-29W
Hogan County, KS
API: 15-101-22119-0000

To Whom It May Concern:

Please hold all information regarding the #1 Hogan for two (2) years.

Thank you,



Clarke T. Sandberg
Geologist

RECEIVED
KANSAS CORPORATION COMMISSION

NOV 18 2008

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 33545

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: WELL 214113

| | | | | | | | |
|--------------------------------|----------------|-----------------|-----------------|---|-------------------------|------------------------|-------------------------|
| DATE <u>10-20-08</u> | SEC. <u>22</u> | TWP. <u>20S</u> | RANGE <u>1E</u> | CALLED OUT <u>7:00 PM</u> | ON LOCATION <u>8:30</u> | JOB START <u>11:30</u> | JOB FINISH <u>12:00</u> |
| LEASE <u>Hessan</u> | | WELL# <u>1</u> | | LOCATION <u>Rightway 4' 13 South 2 West</u> | | COUNTY <u>June</u> | STATE <u>KS</u> |
| OLD OR <u>NEW</u> (Circle one) | | | | <u>North into</u> | | | |

CONTRACTOR L-D Drilling & Rig
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 260
 CASING SIZE 7 5/8 DEPTH 257
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15
 PERFS. _____
 DISPLACEMENT 15.40 Gals Displacement

OWNER Raymond Oil
 CEMENT
 AMOUNT ORDERED 175 SY common 3% gel
2% Gel

EQUIPMENT

PUMP TRUCK CEMENTER Raymond - D
 # 54E HELPER Galien - D
 BULK TRUCK
 # 712-112 DRIVER Tate - W
 BULK TRUCK
 # _____ DRIVER _____

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 ASC _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

REMARKS:

Pipe on bottom break circulation
Mix 175 SY common 3% gel
about 1/2 hr release plus Displace
with 15.40 Gals fresh water.
Common Displacement wash up
his down

TOTAL _____

SERVICE

DEPTH OF JOB 257
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
Head Rent _____ @ _____
 _____ @ _____

CHARGE TO: Raymond Oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

Wooden Plug _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

PRINTED NAME Bill Owen
 SIGNATURE Bill Owen

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____

IF PAID IN 30 DAYS
 RECEIVED
 KANSAS CORPORATION COMMISSION
NOV 18 2008
 CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., LLC. 33509

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: _____

| | | | | | | | |
|-------------------------|--------|------|----------|------------|-------------|-----------------------|------------------------|
| DATE | SEC. | TWP. | RANGE | CALLED OUT | ON LOCATION | JOB START 10:15 Am | JOB FINISH 11:15 Am |
| LEASE | WELL # | | LOCATION | | | COUNTY | STATE |
| OLD OR NEW (Circle one) | | | | | | | |

CONTRACTOR _____
 TYPE OF JOB _____
 HOLE SIZE _____ T.D. 92
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT _____
 AMOUNT ORDERED _____

EQUIPMENT

PUMP TRUCK CEMENTER _____
 # _____ HELPER _____
 BULK TRUCK _____
 # _____ DRIVER _____
 BULK TRUCK _____
 # _____ DRIVER _____

COMMON _____ @ **KCC**
 POZMIX _____ @ **NOV 04 2008**
 GEL _____ @
 CHLORIDE _____ @ **CONFIDENTIAL**
 ASC _____ @
 _____ @
 _____ @
 _____ @
 _____ @
 _____ @
 HANDLING _____ @
 MILEAGE _____ @

REMARKS:

TOTAL _____

CHARGE TO: _____
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 MANIFOLD _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PLUG & FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

PRINTED NAME David Yott
 SIGNATURE [Signature]

SALES TAX (If Any) _____
 TOTAL CHARGES _____
 DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED
 KANSAS CORPORATION COMMISSION
NOV 18 2008
 CONSERVATION DIVISION
 WICHITA, KS