



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34008

Name: Owens Petroleum LLC

Address 1: 1274 202ND RD

Address 2:

City: YATES CENTER State: KS Zip: 66783 + 5411

Contact Person: Scott Owens

Phone: (620) 496-7048

CONTRACTOR: License # 33986

Name: Owens Petroleum Services, LLC

Wellsite Geologist: none

Purchaser:

Designate Type of Completion:

- Checkboxes for completion types: New Well, Re-Entry, Workover, Oil, Gas, OG, CM, Cathodic, WSW, D&A, ENHR, GSW, SWD, ENHR, SIGW, Temp. Abd., Other.

If Workover/Re-entry: Old Well Info as follows:

Operator:

Well Name:

Original Comp. Date: Original Total Depth:

- Checkboxes for well modifications: Deepening, Re-perf., Conv. to ENHR, Conv. to SWD, Conv. to GSW, Plug Back, Commingled, Dual Completion, SWD, ENHR, GSW.

05/03/2011 05/05/2011 06/07/2011
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 15-207-27816-00-00

Spot Description:

SE SW SW NW Sec. 27 Twp. 23 S. R. 16 East West
2852 Feet from North / South Line of Section
4771 Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

County: Woodson

Lease Name: Garberson Well #: 38

Field Name:

Producing Formation: Squirrel

Elevation: Ground: 1054 Kelly Bushing: 0

Total Depth: 1096 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at: 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: Feet

If Alternate II completion, cement circulated from: 0

feet depth to: 1096 w/ 142 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: 0 ppm Fluid volume: 300 bbls

Dewatering method used: Hauled to Disposal

Location of fluid disposal if hauled offsite:

Operator Name: Owens Petroleum, LLC

Lease Name: Roberts License #: 34008

Quarter SE Sec. 4 Twp. 24 S. R. 16 East West

County: Woodson Permit #: D20591

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.

Submitted Electronically

KCC Office Use ONLY

- Checkboxes for office use: Letter of Confidentiality Received, Confidential Release Date, Wireline Log Received, Geologist Report Received, UIC Distribution. Approved by: Deanna Garrison Date: 06/09/2011



1057433

Operator Name: Owens Petroleum LLC Lease Name: Garberson Well #: 38
 Sec. 27 Twp. 23 S. R. 16 East West County: Woodson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Squirrel</td> <td>1031.5</td> <td>-22.5</td> </tr> </table>	Name	Top	Datum	Squirrel	1031.5	-22.5
Name	Top	Datum					
Squirrel	1031.5	-22.5					

CASING RECORD <input type="checkbox"/> New <input checked="" 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	11.625	7	17	40	Portland	20	
Production	5.625	2.875	6.7	1089	OWC	142	

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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD:	Size:	Set At:	Packer At:	Liner Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or ENHR.	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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) (Submit ACO-4)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____	PRODUCTION INTERVAL: _____ _____
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Invoice #	23388	Page	001
Invoice Date		05-03-2011	




True Enterprise
 1326 North Main Street
 LeRoy, KS 66857

(620) 964-2514

620-625-3607

SOLD TO: Scott Owens
 Scott Owens
 1274 202 Road
 Yates Center, KS 66783

Please Remit To: True Enterprise, 1326 North Main, LeRoy, KS 66857

Terms	P.O.#	Order #	Type	Std.By	Cust.#	Slm.
10th Next Month	ga1 38	23388	House	DWT	036070	Store
Quantity	UM	Item #	Description	Price	Extended Price	
20.000	EA	CL203	PORTLAND CEMENT	10.00	200.00	
Comment:					Taxable:	200.00
					Tax:	14.60
					Non-Tax:	0.00
Received by: 					Total:	214.60

Kepley Well Service, LLC

19245 Ford Road
Chanute, KS 66720

Date	Invoice #
5/6/2011	45428

Cement Treatment Report

Owens Petroleum Company
1274 202 Road
Yates Center, KS 66783

(x) Landed Plug on Bottom at 700 PSI
 () Shut in Pressure
 (x) Good Cement Returns
 () Topped off well with _____ sacks
 (x) Shut In

TYPE OF TREATMENT: Production Casing
 HOLE SIZE: 5 5/8"
 TOTAL DEPTH: 1096

Well Name	Terms	Due Date		
	Net 15 days	5/21/2011		
Service or Product		Qty	Per Foot Pricing/Unit Pricing	Amount
Run and cement 2 7/8"		1,089	2.20	2,395.80
Sales Tax			7.30%	0.00

Garberson #38
Woodson County
Section: 27
Township: 23
Range: 16

Hooked onto 2 7/8" casing. Established circulation with 65 barrels of water, 2 GEL, METSO, COTTONSEED ahead, blended 142 sacks of OWC, dropped 2 rubber plugs, and pumped 6 barrels of water

Total	\$2,395.80
Payments/Credits	\$0.00
Balance Due	\$2,395.80