

RECEIVED
DEC 16 2003
KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32756
Name: Double 7 Oil & Gas
Address: 21003 Wallace Rd.
City/State/Zip: Parsons Ks. 67357

Purchaser: _____
Operator Contact Person: Bruce Schulz
Phone: (620) 316-423-0951

Contractor: Name: X Company Tools
License: _____
Wellsite Geologist: _____

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

3-12-01 3-15-01 8-14-01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 037-21516-00-00
County: Crawford
N/2 SW NW Sec. 36 Twp. 30 S. R. 21 East West
1667 feet from S / (circle one) Line of Section
517 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Maffei Well #: 5
Field Name: McCune West

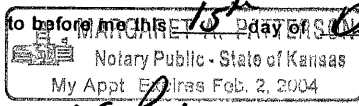
Producing Formation: Bartlesville
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 185' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *Planned 6-0-04*
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used Empty & Fill
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: Kenneth Maffei
Title: Owner Date: 12-11-03
Subscribed and sworn to before me this 15th day of December 2003
Notary Public: Raymond K. Lathum
Date Commission Expires: 2/2/2004



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

X

Operator Name: Double 7 Oil & Gas Lease Name: Maffei Well #: 5
 Sec. 36 Twp. 30 S. R. 21 East West County: Crawford

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, in oil tops 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 (Attach Additional Sheets) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 (Submit Copy) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	# Sacjs Used	Type and Percent Additives
Surface Drill Well	8 1/2" / 11"	20' 6 1/4"			Portland	5	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

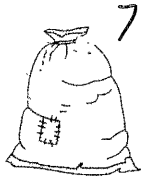
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input 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, Sumit ACO-18.)

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

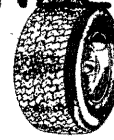
Production Interval _____



Flyer Feed & Tire

P. O. Box 216
501 N. Galveston
Thayer, KS 66776-0216
(620) 839-5400

ORIGINAL



CUSTOMER'S NO. _____ DATE 7-12-01

NAME Double 7

ADDRESS _____

SOLD BY	CASH	C.O.D.	CHARGE	ON ACCT.	MDSE. RET'D.	PAID OUT	
	<input checked="" type="checkbox"/>						

QUAN.	DESCRIPTION	PRICE	AMOUNT
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<u>180</u>	<u>Portland</u>		<u>972.00</u>
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RECEIVED
KANSAS CORPORATION COMMISSION

DEC 31 2004

CONSERVATION DIVISION
WICHITA, KS

K.E.T.

Sales Tax

70.96

TOTAL

1042.96

For KCC Use:
 Effective Date: 3-10-2001
 District #: 3
 SGA? Yes No

KANSAS CORPORATION COMMISSION
 OIL & GAS CONSERVATION DIVISION
NOTICE OF INTENT TO DRILL

Form C-1
 September 1999
 Form must be Typed
 Form must be Signed
 All blanks must be Filled

Must be approved by KCC five (5) days prior to commencing well

Expected Spud Date 3 month 7 day 01 year

OPERATOR: License# 32756
 Name: Double 7 Oil and Gas
 Address: 21003 Wallace Rd
 City/State/Zip: Parsons KS 67357
 Contact Person: Bruce Schulz
 Phone: (316) 423-0951

Spot APPROX
 NW SW NE SE
 Sec. 36 Twp. 30 S. R. 21
 East West
N/2 1667 feet from S (circle one) Line of Section
517 feet from E (circle one) Line of Section
 Is SECTION Regular Irregular?

(Note: Locate well on the Section Plat on reverse side)

County: Crawford
 Lease Name: Maffei Well #: 5
 Field Name: McCune West

CONTRACTOR: License# ? ADVISE ON ACO-1; MUST BE LICENSED WITH KCC
 Name: ? ADVISE ON ACO-1; MUST BE LICENSED WITH KCC

Target Information(s): Bartlesville Yes No

Well Drilled For:		Well Class:		Type Equipment:	
<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Gas	<input type="checkbox"/> Enh Rec	<input type="checkbox"/> Storage	<input checked="" type="checkbox"/> Infield	<input type="checkbox"/> Pool Ext.
<input type="checkbox"/> OWO	<input type="checkbox"/> Seismic	<input type="checkbox"/> Disposal	<input type="checkbox"/> # of Holes	<input checked="" type="checkbox"/> Wildcat	<input type="checkbox"/> Other
<input type="checkbox"/> Other				<input type="checkbox"/> Mud Rotary	<input type="checkbox"/> Air Rotary
				<input type="checkbox"/> Cable	

Nearest Lease or unit boundary: 517

Ground Surface Elevation: N/A feet MSL

Water well within one-quarter mile: Yes No

Public water supply well within one mile: Yes No

Depth to bottom of fresh water: 20'

Depth to bottom of usable water: 33' 900

Surface Pipe by Alternate: 1 2

Length of Surface Pipe Planned to be set: 25'

Length of Conductor Pipe required: N/A

Projected Total Depth: 250'

Producing Formation Target: Bartlesville

Water Source for Drilling Operations:

Well Farm Pond Other

DWR Permit #: _____

(Note: Apply for Permit with DWR)

Will Cores be taken? Yes No

If Yes, proposed zone: _____

If OWWO: old well information as follows:
 Operator: _____
 Well Name: _____
 Original Completion Date: _____ Original Total Depth: _____

Directional, Deviated or Horizontal wellbore? Yes No

If Yes, true vertical depth: _____

Bottom Hole Location: _____

KCC DKT #: _____

AFFIDAVIT

The undersigned hereby affirms that the drilling, completion and eventual plugging of this well will comply with K.S.A. 55-101, et. seq. It is agreed that the following minimum requirements will be met:

1. Notify the appropriate district office *prior* to spudding of well;
2. A copy of the approved notice of intent to drill *shall be* posted on each drilling rig;
3. The minimum amount of surface pipe as specified below *shall be set* by circulating cement to the top; in all cases surface pipe *shall be set* through all unconsolidated materials plus a minimum of 20 feet into the underlying formation.
4. If the well is dry hole, an agreement between the operator and the district office on plug length and placement is necessary *prior to plugging*;
5. The appropriate district office will be notified before well is either plugged or production casing is cemented in;
6. If an ALTERNATE II COMPLETION, production pipe shall be cemented from below any usable water to surface within **120 days** of spud date. *In all cases, NOTIFY district office* prior to any cementing.

I hereby certify that the statements made herein are true and to the best of my knowledge and belief.

Date: 3-2-01 Signature of Operator or Agent: Bruce Schulz Title: Part owner

For KCC Use ONLY

API # 15 - 037-21516-0000

Conductor pipe required NONE feet

Minimum surface pipe required 20 feet per Alt. (2)

Approved by: JK 3-5-2001

This authorization expires: 9-5-2001
 (This authorization void if drilling not started within 6 months of effective date.)

Spud date: _____ Agent: _____

Remember to:

- File Drill Pit Application (form CDP-1) with Intent to Drill;
- File Completion Form ACO-1 within 120 days of spud date;
- File acreage attribution plat according to field proration orders;
- Notify appropriate district office 48 hours prior to workover or re-entry;
- Submit plugging report (CP-4) after plugging completed;
- Obtain written approval before disposing or injecting salt water.

MAR 5 2001

MAR 1 2001

Mail to: KCC - Conservation Division, 130 S. Market - Room 2078, Wichita, Kansas 67202

CONSERVATION DIVISION

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30
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