Operator: License #: 33168
Name: WOLSEY OPERATING COMPANY, LLC
Address: 125 N. Market, Suite 1000
City/State/Zip: Wichita, Kansas 67202-1775
Purchaser: Plains Marketing
Operator Contact Person: Dean Pattisson, Operations Manager
Phone: (316) 267-4379 ext 107
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Wesley D. Hansen

Designate Type of Completion:

- ✔ New Well
- ✔ Re-Entry
- ✔ Workover
- ✔ Oil
- ✔ SWD
- ✔ SLOW
- ✔ 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. __________
SD __________
Plugged Back __________
Plug Back Total Date __________
Commingled __________
Docket No. __________
Dual Completion __________
Docket No. __________
Other (SWD or Enhr.? ) __________
Docket No. __________

12/13/03 12/29/03 1/27/04
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 007-22783 0000
County: Barber
C  SE  NE  SE  Sec. 31  Twp. 32  S. R. 12  East  West
1650 feet from S / N (circle one) Line of Section
330 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE  SW  SE  NW

Lease Name: Medicine Lodge-Boggs
Field Name: Mississippian
Producing Formation: 1792
Elevation: Ground: 1801
Kelly Bushing:
Total Depth: 5177 Plug Back Total Depth: 4977
Amount of Surface Pipe Set and Cemented at: 268 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set
If Alternate II completion, cement circulated from: n/a
feet depth to: 12-27-06

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 offshore:
Operator Name: _______________
License No.: _______________

Quarter Sec. Twp. S. R. 12 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: __________________________
Title: Dean Pattisson, Operations Manager Date: April 6, 2004

Subscribed and sworn to before me this 6th day of April 20-04

Notary Public: Debra K. Clingan
Date Commission Expires: March 16, 2004

KCC Office Use ONLY

Yes Letter of Confidentiality Attached
If Denied, Yes  Date:

- Wireline Log Received
- Geologist Log Received
- UIC Distribution
Operator Name: WOOLEY OPERATING COMPANY, LLC  Lease Name: LONKER  Well #:

Sec: 32  T: 22  R: 76  .  County: Barber

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stem 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

Log: Formation (Top), Depth and Datum  ☐ Sample

Name  Top  Datum
Lansing  4096  -2295
Mississippian  4632  -2831
Kinderhook  4818  -3017
Viola  4924  -3123
Simpson  5032  -3231

Dual Induction
Compensated Neutron Density
Sonic
Sonic Cement Bond

CASING RECORD  ☐ New  ☐ Used

Report all strings set-conductor, surface, intermediate, production, etc.

<table>
<thead>
<tr>
<th>Purpose of String</th>
<th>Size Hole Drilled</th>
<th>Size Casing Set (in O.D.)</th>
<th>Weight Lbs./ft.</th>
<th>Setting Depth</th>
<th>Type of Cement</th>
<th># Sacks Used</th>
<th>Type and Percent Additives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Surface</td>
<td>14-1/4&quot;</td>
<td>10-3/4&quot;</td>
<td>32#/#ft</td>
<td>268</td>
<td>60/40 poz</td>
<td>175</td>
<td>2%gel, 3%cc</td>
</tr>
<tr>
<td>Production</td>
<td>7-7/8&quot;</td>
<td>4-1/2&quot;</td>
<td>10-1/2/#ft</td>
<td>5032</td>
<td>Class H</td>
<td>310</td>
<td>10%gyp, 10%salt, 6% gilsonite</td>
</tr>
</tbody>
</table>

ADDITIONAL CEMENTING / SQUEEZE RECORD

<table>
<thead>
<tr>
<th>Purpose:</th>
<th>Depth Top Bottom</th>
<th>Type of Cement</th>
<th>#Sacks Used</th>
<th>Type and Percent Additives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Perforate</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Protect Casing</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plug Back TD</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plug Off Zone</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

PERFORATION RECORD - Bridge Plugs Set/Type
Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)

<table>
<thead>
<tr>
<th>Shots Per Foot</th>
<th>Mississippian</th>
<th>Acid, Fracture, Shot, Cement Squeeze Record</th>
</tr>
</thead>
<tbody>
<tr>
<td>4</td>
<td>4634′-4660′</td>
<td>Acid: 1300 gal 10% HCL acid</td>
</tr>
<tr>
<td></td>
<td>Mississippian</td>
<td>Frac: 84,000# 16/30 &amp; 5000# resin coated sand</td>
</tr>
</tbody>
</table>

TUBING RECORD

<table>
<thead>
<tr>
<th>Size Set At</th>
<th>Packer At</th>
<th>Liner Run</th>
<th>Producing Method</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-3/8&quot;</td>
<td>none</td>
<td>Liner Run</td>
<td>☐ Flowing</td>
</tr>
</tbody>
</table>

Date of First, Resumerd Production, SWD or Enhr.
February 4, 2004

Producing Method
☐ Flowing  ☑ Pumping  ☐ Gas Lift  ☐ Other (Explain)

Estimated Production Per 24 Hours
Oil         Gas        Mcf       Water
30          55         51        1800.1  35.0

Disposition of Gas
METHOD OF COMPLETION
☐ Vented  ☑ Sold  ☐ Used on Lease
(If vented, Submit ACO-18.)

4634′-4660′
To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper 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 & understand the "TERMS AND CONDITIONS" listed on the reverse side.