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

Operator: License # 4567
Name: D.E. Exploration, Inc.
Address: P.O. Box 128
City/State/Zip: Wellsville, KS 66092
Purchaser: Plain's Marketing, L.P.
Operator Contact Person: Douglas G. Evans, President
Phone: (785) 883-4057
Contractor: Name: Evans Energy Development, Inc.
License: 8509
Wellsite Geologist: None

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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.

12/22/04	12/27/04	12/27/04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-091-22,997-00-00
County: Johnson
__ SW . SE . SE Sec. 1 Twp. 15 S. R. 21 ☑ East ☐ West
3030 feet from (S) / N (circle one) Line of Section
990 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: T.E.A. Well #: I-3
Field Name: Edgerton
Producing Formation: Squirrel
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 898' Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at 22.0' Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
If yes, show depth set ____ Feet
If Alternate II completion, cement circulated from 883.0'
feet depth to Top w/ 130 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 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: Douglas G. Evans
Title: President Date: 1/18/2005
Subscribed and sworn to before me this 18th day of January, 20 05.
Notary Public: Stacy J. Thyer
Date Commission Expires: 3-31-07

NOTARY PUBLIC STACY J. THYER Appt. Exp. 3-31-07

KCC Office Use ONLY
NO Letter of Confidentiality Received
If Denied, Yes ☐ Date:
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Side Two

Operator Name: D.E. Exploration, Inc. Lease Name: T.E.A. Well #: I-3

Sec. 1 Twp. 15 S. R. 21 ☑ East ☐ West County: Johnson

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 (Attach Additional Sheets) ☐ Yes ☑ No

Samples Sent to Geological Survey ☐ Yes ☑ No

Cores Taken ☐ Yes ☑ No

Electric Log Run ☑ Yes ☐ No (Submit Copy)

List All E. Logs Run:

Gamma Ray/Neutron/CCL

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

Name Top Datum

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	9"	6 5/8"	NA	22.0'	Portland	4	Service Co.
Production	5 5/8"	2 7/8"	NA	883.0'	50/50 Poz	130	Service Co.

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ 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
17	832.0'-840.0'	2" DML RTG	832.0'
			840.0'

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TUBING RECORD Size	Set At	Packer At	Liner Run
2 7/8"	883.0'	No	☐ Yes ☑ No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
NA	☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NA		NA		

Disposition of Gas METHOD OF COMPLETION Production Interval

☐ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)

☐ Open Hole ☑ Perf. ☐ Dually Comp. ☐ Commingled _____

☐ Other (Specify) _____