

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION RECEIVED
WELL COMPLETION FORM
ACO-1 WELL HISTORY

KANSAS CORPORATION COMMISSION

DESCRIPTION OF WELL AND LEASE

Operator: License # 32294

MAR 15 2001

API NO. 15- 121-27519-0000

MOSHEW Miami

X E

W

- NW - NW - NW Sec. 12 Twp. 16 Rge. 24

330

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:
NE, SE, NW or SW (circle one)

Lease Name Kallevig Well # 1

Field Name Paola-Rantoul

Producing Formation Mississippian

Elevation: Ground 1003 KB N/A

Total Depth 963' PBD N/A

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set N/A Feet

If Alternate II completion, cement circulated from 955

feet depth to surface w/ 230 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content N/A ppm Fluid volume 500+/- bbls

Dewatering method used evaporation

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name License No.

Quarter Sec. Twp. S Rng. E/W

County Docket No.

If Workover:

Operator:

Well Name:

Comp. Date Old Total Depth

Deepening Re-perf. Conv. to Inj/SWD
Plug Back PBD
Commingled Docket No.
Dual Completion Docket No.
Other (SWD or Inj?) Docket No.

11/2/2000 11/6/2000 waiting on completion
Spud Date Date Reached TD Completion Date

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 on 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 Geologist Date 3-12-01

Subscribed and sworn to before me this 12th day of March, 2001.

Notary Public Alice M. Reeves

Date Commission Expires 3-22-2003

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
KCC SWD/Rep
KGS Plug NGPA
Other (Specify)

Form ACO-1 (7-91)

ALICE M. REEVES
Notary Public - State of Kansas
My Appt. Expires 3-22-2003

SIDE TWO

Operator Name Osborn Energy, L.L.C.Lease Name KallevigWell # 1Sec. 12 Twp. 16 Rge. 24 East WestCounty Miami

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drillers Log Attached	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E.Logs Run:			
Gamma Ray Neutron Log			

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casting Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	13"	10"		20'	Portland	3	None
Production	8 3/4"	5 1/2"		955'	Regular	230	2% gel, 2% CaCl
							1/4 lb flocale

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 (Amount and Kind of Material Used) Depth				
2	395.0' - 403.0'							
TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
N/A								
Date of First, Resumed Production, SWD or Inj. waiting on completion		Producing Method		<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours		Oil N/A	Bbls. N/A	Gas 2	McF 49	Water Bbls. N/A	Gas-Oil Ratio N/A	Gravity N/A

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) SIGW