

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACD-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

SIDE ONE

Operator: License # 5192

Name: Shawmar Oil & Gas Co., Inc.

Address P.O. Box 9

City/State/Zip Marion, KS 66861

Purchaser: Cooperative Refining, LLC

Operator Contact Person: James M. Cloutier

Phone (316) 382-2932

Contractor: Name: Kan-Drill, Inc

License: 32548

Wellsite Geologist: N/a

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: _____

Comp. Date _____ Old Total Depth _____

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

01/11/01 01/19/01 02/12/01
Spud Date Date Reached TD Completion Date

API NO. 15- 017-20807-0000

County Chase

NW¹ NE¹ SE¹ Sec. 23 Twp. 19 Rge. 6 E

2820 Feet from S/N (circle one) Line of Section

965 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 LIPS Well # 7-23

Field Name Lipps D

Producing Formation Lansing-KC

Elevation: Ground 1455 KB _____

Total Depth 1542 PSTD _____

Amount of Surface Pipe Set and Cemented at 203 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)

Chloride content _____ ppm Fluid volume _____ bbl.

Deaerating method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 [Signature]

Title President Date 04/25/01

Subscribed and sworn to before me this 25 day of April

Notary Public [Signature] **CAROL MAKOVEC**

Date Commission Expires Mar. 3, 2004 **NOTARY PUBLIC**

STATE OF KANSAS

My Appt. Exp. 03/07/04

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)

Operator, Shawmar Oil & Gas Co., Inc. Lease Name LIPS Well # 7-23

East

County Chase

Sec. 23 Twp. 18 Rge. 6

West

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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Lansing-KC	1460	

List All E.Logs Run:

Dual Compensated Porosity
 Dual Induction
 Sonic Cement Bond

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	12 1/4	8 5/8		203	regular	120	3% CaCl ₂ 25 #flocel
Longstring	6 3/4	4 1/2		1527	regular	205	4% gel. 2% CaCl ₂ 4#/sk Gilsonite

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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
4	1472 - 1478	5000 gal. 15%	1472-1478

TUBING RECORD Size 2 3/8 Set At 1504 Packer At N/a Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. March 7, 2001 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 70 Bbls. Gas 20 Mcf Water 10 Bbls. Gas-Oil Ratio Gravity 37

Disposition of Gas:

Vented Sold Used on Lease
 (If vented, submit ACD-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled

Production Interval

1472-1478