

COPY *Shd*

FORM MUST BE TYPED

SIDE ONE

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

API NO. 15- 15-017-20800-0000
County Chase
Approx. C
SW - SE - NE - Sec. 34 Twp. 19 Rge. 7 X E

Operator: License # 5399
Name: American Energies Corporation
Address 155 North Market, Suite 710
Wichita, Kansas 67202
City/State/Zip _____
Purchaser: Cibola
Operator Contact Person: Alan L. DeGood
Phone (316) 263-5785
Contractor: Name: McPherson Drilling
License: 5495
Wellsite Geologist: David Goldak

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, USW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
6/27/00 6/30/00 6/30/00
Spud Date Date Reached TD Completion Date
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

2210 Feet from S (circle one) Line of Section
970 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 Starkey Well # A1
Field Name Elmdale

Producing Formation Lansing
Elevation: Ground 1201 KS _____
Total Depth 1180' PSTD _____

Amount of Surface Pipe Set and Cemented at 7" @ 204' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ v/ _____ sx cat.

Drilling Fluid Management Plan As per hole Alt. 1, 9-28-00
(Data must be collected from the Reserve Pit) etc.

Chloride content 30,000 ppm Fluid volume 50 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. _____

RECEIVED
STATE CORPORATION COMMISSION
JUL 27 2000
CONSERVATION DIVISION
Wichita, Kansas

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 Alan L. DeGood
Title President Date 7/18/00

Subscribed and sworn to before me this 18th day of July
19 2000
Notary Public Melinda S. Wooten
Date Commission Expires 3-12-2004
Melinda S. Wooten

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
_____ KCC _____ SWD/Rep _____ NGPA
_____ KGS _____ Plug _____ Other
(Specify)

Operator Name American Energies Corporation

Lease Name Starkey

Well # A1

Sec. 34 Twp. 19 Rge. 7

East
 West

County Chase

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

See Attachment

List All E.Logs Run:

Dual Compensated Porosity,
Dual Induction
Computer Processed Interpretation

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	# Sacks Used	Type and Percent Additives
Surface	9 1/2"	7"	20#	204'	3% CaCL2 & Floseal	70	
Production Casing		4 1/2"	10.5#	1177'	2% Gel, 1% CaCl	125	4 # per sx Gilsonite
Cement Circulated							

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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)	De-
2 sh/ft.	1145-1149	500 gal. MCA 15%	

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8"	1135	None	
Date of First, Resumed Production, SWD or Inj.			Producing Method <input checked="" 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
		75 MCF/D	0		

Disposition of Gas:

Vented Sold Used on Lease

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled

Production Interval