

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS DIVISION

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JUN 24 2004

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC WICHITA

Operator: License # 5399  
Name: American Energies Corporation  
Address: 155 North Market, Suite 710  
City/State/Zip: Wichita, KS 67202  
Purchaser: Alkan Gas Gathering System  
Operator Contact Person: Alan L. DeGood  
Phone: (316) (316) 263-5785  
Contractor: Name: McPherson Drilling  
License: 5495  
Wellsite Geologist: Frank Mize

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. \_\_\_\_\_

4/06/04 4/9/2004 4/15/04  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API NO. 15 - 017-20858-00-00  
County: Chase  
N/2 NE - NW - 34 Sec. 19 S. R. 7 ☒ East ☐ West  
330 feet from S / N (circle one) Line of Section  
1980 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW  
Lease Name: McCallum/Simmons Gas Unit Well #: 1

Field Name: Elmdale

Producing Formation: Lansing

Elevation: Ground: 1201 Kelly Bushing: None

Total Depth: 1211 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 3 jts 7" 22# @ 91' 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)

No pits used

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 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: Alan L. DeGood

Title: Alan L. DeGood, President Date: 6/8/04

Subscribed and sworn to before me this 8th day of June

2004

Notary Public: Melinda S. Wooten

Date Commission Expires: Melinda S. Wooten, Notary Exp. 3/12/08

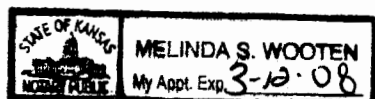
KCC Office Use ONLY

☐ Letter of Confidentiality Attached

If Denied, Yes ☐ No ☐ Date: \_\_\_\_\_

☐ Wireline Log Received

☐ UIC Distribution



# ORIGINAL

Side Two

Drillator Name: American Energies Corporation Lease Name: McCallum-Simmons Well: 1  
Sec. 34 Twp. 19S S. R. 7E ☐ West County: Chase

**INSTRUCTIONS:** Show important tops and bas of formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval test, 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 charts(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 ☐ Yes ☒ No  
(Attach Additional Sheets)  
Samples Sent to Geological Survey ☐ Yes ☒ No  
Cores Taken ☐ Yes ☒ No  
Electric Log Run Yes No ☒ Yes ☐ No  
(Submit Copy)

List All E. Logs Run:

Sonic Cement Bond, Dual Compensated  
Porosity, Dual Induction

☒ Log Formation (Top), Depth and Datum  
Name Top

☐ Sample  
Datum

See attached Drilling Report

## 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	10 5/8"	7"	22#	91'	60/40 poz	50	1 sx gel, 1 1/2 sx Cal
Production		4 1/2" used	10.5#	1197'	USC	175	3 sx gel

## 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 SPF	1141-43, 1150-53, 1169,71, total span 30' with 25 holes	250 gallons 15% MA acid	1171'
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TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	J55 Used @ 1171'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
4/29/2004	<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
		125 MCFPD		

Disposition of Gas METHOD OF COMPLETION

☐ Vented ☐ ☐

(If vented, Sumit ACO-18.)

☒ Open Hole☐ Other Specify

Production Interval

☐ Dually Comp.☐ Commingled