

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Handwritten initials

Operator: License # 33209
 Name: Penn Virginia Oil & Gas Corporation
 Address: 2550 E. Stone Dr., Suite 110
 City/State/Zip: Kingsport, TN 37660
 Purchaser: NA
 Operator Contact Person: Richard Waddell, Operations Manager
 Phone: (423) 723-0281
 Contractor: Name: Gulick Drilling Co., Inc. **RECEIVED**
 License: 32854 **OCT 23 2003**
 Wellsite Geologist: _____
 Designate Type of Completion: **KCC WICHITA**
 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: _____
 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. _____

9-29-03	10-10-03	10-13-03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 073-23961
 County: Greenwood
 NE 1/4, NE 1/4, SW 1/4 Sec. 23 Twp. 23 S. R. 9 East West
1980 feet from S (circle one) Line of Section
2030 feet from W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Teter 23-11 Well #: 2 SWD
 Field Name: Not designated Avb
 Producing Formation: NA
 Elevation: Ground: 133' Kelly Bushing: 1345'
 Total Depth: 3318 Plug Back Total Depth: 3318
 Amount of Surface Pipe Set and Cemented at 532 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 crnt.

Drilling Fluid Management Plan *REC 10-28-03*
 (Data must be collected from the Reserve Pit)
 Chloride content 350 ppm Fluid volume 500 +/- bbls
 Dewatering method used Will use this SWD well upon approval to inject
 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: Richard Waddell
 Title: Operations Manager Date: 10/21/2003
 Subscribed and sworn to before me this 21st day of October
 19 2003
 Notary Public: J. Reagan Baggel
 Date Commission Expires: 2/26/2006

KCC Office Use ONLY

Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: Penn Virginia Oil & Gas Corporation Lease Name: Teter 23-11 Well #: 2 SWD
 Sec. 23 Twp. 23 S. R. 9 East West County: Greenwood

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: <u>Photo Density,</u> <u>Compensated Neutron,</u> <u>PE, GR, Induction,</u> <u>CBL</u>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name _____ Top _____ Datum _____ Attached _____
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CASING RECORD <input type="checkbox"/> New <input 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	# Sacs Used	Type and Percent Additives
Surface		9 5/8	36	532'	CIA	225	20% Gel, 3% CaCl 1/4 lb/sk flakes
Intermediate		7	23	2888	CIA	350	4% Gel 2% CaCl2 1/4lb coal seal

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

TUBING RECORD		Size <u>4 1/2"</u>	Set At <u>2835'</u>	Packer At <u>2835'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method <input 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

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACO-18.)
 Other (Specify) _____

TETER 23-11-2 SWD

Formation (Top), Depth and Datum:

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Name	Top	Datum
Kansas City LS.	1593	-250
Pawnee LS.	1991	-648
Cherokee Group	2052	-709
Mississippian LS.	2387	-1044
Kinderhook Sh.	2701	-1358
Viola Fm.	2784	-1441
Simpson Fm.	2824	-1481
Arbuckle Fm.	2871	-1528