

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm ACC-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5786

Name: McGowen Drilling, Inc.

Address: P.O. Box 299

City/State/Zip: Mound City, KS 66056

Purchaser:

Operator Contact Person: Doug McGowen

Phone: (913) 795-2258

Contractor: Name: McGowen Drilling, Inc.

License: 5786

Wellsite Geologist: n/a

RECEIVED

SEP 22 2003

KCC WICHITA

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
 Casing/ledged Docket No.
 Dual Completion Docket No.
 Other (SWD or Enhr.?) Docket No.

05-11-03	05-11-03	05-11-03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 011-22936-00-00

County: Bourbon

Sec. - Sec. - Sec. 24 Twp. 25 S. Pl. 24 East West

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:

(circle one) NE SE NW SW

Lease Name: Coleman Well #: 1-03

Field Name:

Producing Formation: Burgess

Elevation: Ground: Kelly Bushing:

Total Depth: 360' Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 328

feet depth to surface w/ 40 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *Alt II on 9-24-03*

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 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: *Barbara J. Annis*

Title: President Date: 9/17/03

Subscribed and sworn to before me this 17th day of SEPTEMBER,

2003.

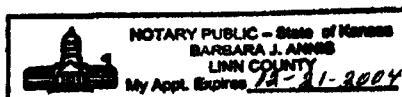
Notary Public: *Barbara J. Annis*

Date Commission Expires: 12-21-2004

KCC Office Use ONLY

 Letter of Confidentiality AttachedIf Denied, Yes Date: _____ Wireline Log Received Geologist Report Received

UNC Distribution



Operator Name: McGowen Drilling, Inc.

Lessee Name: Coleman

Well #: 1-03

Sec. 24 Twp. 25 S. R. 24

 East West

County: Bourbon

INSTRUCTIONS: Show important tops and bases of formations penetrated. Detail all cores. Report all final copies of 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 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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum Name Top Detum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	See Attached Sheet	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RECEIVED	
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	SEP 22 2003	
List All E. Logs Run:	KCC WICHITA		

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	8 3/4	6 1/2	8	20	Portland	5	none
Long String	6 1/8	2 3/8	4.5	328	Portland	40	none

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: — Perforate — Protect Casing — Plug Back TD — Plug Off Zone	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify footage of Each Interval Perforated				Add, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth
TUBING RECORD				Size	Set At	Packer At	Liner Run
							<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Enth.		Producing Method		<input checked="" type="checkbox"/> Flowing	<input type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Specify)
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.			Gas-Oil Ratio	Gravity
		30					

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) _____