

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 4226
Name: galemore oil
Address: p.o. box b
City/State/Zip: chanute Ks, 66720
Purchaser: _____
Operator Contact Person: matt galemore
Phone: (620) 625-2621
Contractor: Name: j & j drilling
License: 5442
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: K. C. Energy

Well Name: Milligan 13
Original Comp. Date: 11-22-82 Original Total Depth: 980
____ Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled Docket No. E-12,901
____ Dual Completion Docket No. _____
____ Other (SWD or Enhr.?) Docket No. _____

<u>11-17-82</u>	<u>11-22-82</u>	<u>11-22-82</u>
<u>Spud Date</u> or	Date Reached TD	<u>Completion Date</u> or
Recompletion Date		Recompletion Date

API No. 15 - 205-23,158
County: Wilson
E SE SE SE Sec. 14 Twp. 27 S. R. 15 East West
165 feet from S N (circle one) Line of Section
495 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Milligan Well #: 13

Field Name: Buffalo-Vilas
Producing Formation: Cattleman

Elevation: Ground: 857 Kelly Bushing: _____
Total Depth: 980 Plug Back Total Depth: N/A

Amount of Surface Pipe Set and Cemented at 85 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 N/A ppm Fluid volume 20 bbls
Dewatering method used N/a

Location of fluid disposal if hauled offsite:

Operator Name: n/a
Lease Name: n/a License No.: n/a
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: [Signature]
Title: partner Date: 2-18-03
Subscribed and sworn to before me this 18th day of February, 2003
Notary Public: [Signature]
Date Commission Expires: May 20 2005

KCC Office Use ONLY
____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: galemore oil Lease Name: Milligan Well #: 13
 Sec. 14 Twp. 27 S. R. 15 East West County: Wilson

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 Yes <input checked="" type="checkbox"/> No Electric Log Run Yes <input checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run: Gamma ray neutron	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:20%;">Log Name</th> <th style="width:60%;">Formation (Top), Depth and Datum</th> <th style="width:20%;">Sample Datum</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	Sample Datum			
Log Name	Formation (Top), Depth and Datum	Sample Datum					

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
casing	6 1/4	4 1/2		975	class A	115	
surface	10'	7		85	class A	10	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> 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	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
1 shot per ft.	3 1/2 alum. 907-919		912.50

TUBING RECORD		Size	Set At	Packer At	Liner Run	
		2 1/2	912.50		Yes	No
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
			Flowing	Pumping	Gas Lift	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, Sumit ACO-18.) Other (Specify) _____