

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

Operator: License # 31796Name: Quest Energy Service, Inc.Address P O Bpx 100City/State/Zip Benedict KS 66714Purchaser: Quest Energy Service, Inc.Operator Contact Person: Dick CornellPhone (620) 698-2250Contractor: Name: MOKATLicense: 5831Wellsite Geologist: None

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> SLOW	<input type="checkbox"/> Temp. Abd.
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGW	
<input type="checkbox"/> Dry	<input type="checkbox"/> Other (Core, WSW, Expl., Cathodic, etc)		

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

<input type="checkbox"/> Deepening	<input type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to Inj/SWD
<input type="checkbox"/> Plug Back		<input type="checkbox"/> PBTD
<input type="checkbox"/> Commingled	Docket No. _____	
<input type="checkbox"/> Dual Completion	Docket No. _____	
<input type="checkbox"/> Other (SWD or Inj?)	Docket No. _____	

<u>1/25/01</u>	<u>1/26/01</u>	<u>1/30/01</u>
Spud Date	Date Reached TD	Completion Date

API NO. 15- 133-25656-0000County NeoshoSE - SE - NE / 4 Sec. 11 Twp. 30 Rge. 17 X E3000 Feet from S (circle one) Line of Section360 Feet from E (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE NW or SW (circle one)Lease Name Goins Well # 5Field Name South ThayerProducing Formation Rowe/RivertonElevation: Ground 1040 KB _____Total Depth 1190' PBTD 1177'Amount of Surface Pipe Set and Cemented at 20 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1175feet depth to surface w/ 198 sx cmt.Drilling Fluid Management Plan ALL EN 8-12-02
(Data must be collected from the Reserve Pit)Chloride content N/A ppm Fluid volume _____ bblsDewatering method used Air drilledLocation of fluid RELEASED offsite:Operator Name JUN 10 2002

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

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 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 Dick CornellTitle Compliance Officer Date 4/29/01Subscribed and sworn to before me this 30th day of April, 2001.Notary Public Pamela G. GravesDate Commission Expires 6/4/2001 Pamela G. Graves

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/> KCC	<input type="checkbox"/> SWD/Rep	<input type="checkbox"/> NGPA
<input type="checkbox"/> KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other
(Specify)		
KCC		

SIDE TWO

Operator Name Quest Energy Service, Inc.Lease Name GoinsWell # 5Sec. 11 Twp. 30S Rge. 17☒ EastCounty Neosho☐ West

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 ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☒ Yes ☐ No
(Submit Copy.)List All E.Logs Run: GR-N☒ Log Formation (Top), Depth and Datums ☒ Sample

Name	Top	Datum
Altamont Lime	454'	+586
Pawnee Lime	596'	+444
Oswego Lime	671'	+369
Verdigris Lime	779'	+261
Bartlesville Sand	926'	+114
Mississippi Lime	1134'	- 94

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	11"	8 5/8"	24.75	21'	"A"	6	None
Production	6 3/4"	4 1/1"	9.5	1175'	"A"	198	40/60 Poz 80 lbs Salt 50 lbs Gilsomite

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
Four	1116 - 1120 3 1/8" DML-HSC 17 shots	120 sx 20/40 Sand, 400 bbl 10# gelled KCL water	1116-1120
Four	1082 - 1086 3 1/8" DML-HSC 17 shots	60 sx 20/40 Sand	1081-1086

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8"	1130'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. 04-26-01 Producing Method ☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	50	100		

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) _____