

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

Operator: License # 32187
Name: Southwind Exploration, LLC
Address: P.O. Box 34
City/State/Zip: Piqua, KS 66761
Purchaser: Seminole
Operator Contact Person: F.L. Ballard
Phone: (620) 468-2885
Contractor: Name: Well Refined Drilling Company
License: 33072
Wellsite Geologist: none
Designate Type of Completion:
...x... New Well Re-Entry Workover
...x... Oil SWD SLOW Temp. Abd.
...x... Gas ENHR SIGW
...x... 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. _____
Spud Date or Recompletion Date 04/30/03 Date Reached TD 05/01/03 Completion Date or Recompletion Date 05/01/03

API No. 15 - 205-25602-0000

County: Wilson

NW NW SE Sec. 15 Twp. 30 S. R. 17 East West

2290 feet from N (circle one) Line of Section

2290 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Keighley Well #: 1

Field Name: Neodesha East

Producing Formation: Mulky

Elevation: Ground: 940 Kelly Bushing:

Total Depth: 755 Plug Back Total Depth: 744.2

Amount of Surface Pipe Set and Cemented at 21.5' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 756'

feet depth to surface w/ 95sks sx cm.

Drilling Fluid Management Plan

(Data must be collected from the Reserve PII)

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:  Title: Agent Date: 6/10/03

KCC Office Use ONLY

Letter of Confidentiality Attached

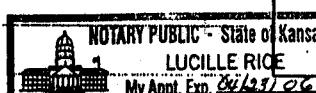
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Subscribed and sworn to before me this 10th day of June, 2003
Notary Public: 
Date Commission Expires: 04/23/06



Operator Name: Southwind Exploration, LLC

Lease Name: Keighley

Well #: 1

Sec. 15 Twp. 30 S. R. 17 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, lime 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	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	See attached Logs	
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run:			
Drillers Gamma Ray Neutron			

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	12 1/4"	8 5/8"	32#	21.5'	class A	4	
Production	6 3/4"	4 1/2"	5.9#	755'	50/50	95	
					poz mix		

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
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
2	686-694	15% HCL	
2	704-710	20 x 40 sand	686-710'

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First Resumed Production, SWD or Enhr.	Producing Method	<input type="checkbox"/> Flowing	<input checked="" type="checkbox"/> Pumping	<input type="checkbox"/> Gas LM	<input type="checkbox"/> Other (Explain)
06/01/03					

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	x 0	x 50	x	40		

Disposition of Gas	METHOD OF COMPLETION	Production Interval

<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If Vented, Summit ACO-16)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled
	<input type="checkbox"/> Other (Specify) _____