

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**

Operator: License # 5150
 Name: COLT ENERGY, INC.
 Address: P. O. BOX 388
 City/State/Zip: IOLA, KS 66749
 Purchaser: ONEOK
 Operator Contact Person : DENNIS KERSHNER
 Phone: (620 365-3111)
 Contractor: Name: MCPHERSON DRILLING
 License: 5675
 Wellsite Geologist: JIM STEGEMAN
 Designate Type Of Completion:
 New Well ReEntry 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 Entr/SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Entr.?) Docket No. _____
 _____ 5-03-01 _____ 5-07-01 _____ 10-14-01
Spud Date or Completion Date Date Reached TD Completion Date or Recompletion Date

API No. 15-205-25,359
 County: WILSON
SE-SW-SW Sec. 28 Twp. 30 S. R. 17 X E
350 feet from S Line of Section
4290 feet from E Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 Circle one SE
 Lease Name: J D FRIESS Well #: 2
 Field Name: NEODESHA
 Producing Formation: MISSISSIPPI
 Elevation : Ground: UNKNOWN Kelly Bushing: _____
 Total Depth: 1144 Plug Back Total Depth: 1130
 Amount of Surface Pipe Set and Cemented at 20 Feet
 Multiple Staging Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II Completion, cement circulated from 1130
 feet depth to SURFACE w/ 157 sx cement.

Drilling Fluid Management Plan(Data Collected From Pit)
 Chloride Content 1000 ppm Fluid Volume 80 bbls
 Dewatering method used PUMPED OUT PUSH IN
 Location of fluid disposal if hauled offsite:
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S R _____ 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 of side two of this form will be held confidential for a period of 12 months if requested in writing and submitted with this form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well reports shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 with all temporary 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.

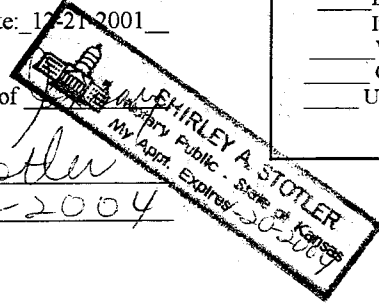
Signature: Dennis Kershner

Title: OFFICE MANAGER Date: 1-21-2001

Subscribed and sworn to before me this 7th day of _____

2001
 Notary Public: Shirley A Stotler

Date Commission Expires: 1-20-2004



KCC Office Use Only

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

Operator Name COLT ENERGY, INC. Lease Name J D FRIESS Well # 2
 Sec. 28 Twp. 30 S. R. 17 X 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 <u> </u> Yes <u> X </u> No (Attach Additional Sheets)	<u> X </u> Log Formation (Top), Depth and Datum <u> </u> Sample Name <u> </u> Top <u> </u> Datum SEE ATTACHED DRILLERS LOG
Samples Sent to Geological Survey <u> X </u> Yes <u> </u> No Cores Taken <u> </u> Yes <u> X </u> No Electric Log Run <u> X </u> Yes <u> </u> No (Submit Copy) List All E. Logs Run:	

CASING RECORD <u> X </u> NEW <u> </u> 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 1/4	8 5/8	24	20'	PORTLAND	4 SXS	
PRODUCTION	6 3/4	4 1/2	10.5	1130	PORTLAND	157SXS	2%GEL

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

Shots Per/F	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
	OPEN HOLE 1113 - 1116.5	NONE	

TUBING RECORD		Set At	Packer At	Liner Run	<u> </u> Yes <u> </u> No	
Date of First Production 10-14-01			Producing Method: <u> X </u> Flowing <u> </u> Pumping <u> </u> Gas Lift			
Estimated Production/24hrs	Oil <u> </u> Bbls	Gas Mcf 25	Water 0	BBLS.	Gas-Oil Ratio	Gravity
Disposition Of Gas		METHOD OF COMPLETION		Production Interval		
<u> </u> Vented <u> X </u> Sold <u> </u> Used on Lease	<u> X </u> Open Hole	<u> </u> Perf.	<u> </u> Dually Compl.	<u> </u> Commingled	<u> </u>	
(If vented Submit ACO-18)		-----Other (Specify) _____				