

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

COPY

Operator: License # 32606
Name: Devon Energy Production Company, L.P.
Address: 20 North Broadway, Suite 1500 Attn: Robert Cole
City/State/Zip: Oklahoma City, OK 73102-8260
Purchaser: Tall Grass, LLC

Operator Contact Person: Robert Cole
Phone: (405) 235-3611

Contractor: Name: McPherson Drilling
License: #5675

Wellsite Geologist: David Fleming

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: _____
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. _____

<u>1/13/03</u> Spud Date or Recompletion Date	<u>1/14/03</u> TD Date Reached TD	<u>1/29/03</u> Completion Date or Recompletion Date
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API No. 15 - 133-25918

County: Neosho

NWSE SW Sec. 1 Twp. 30 S. R. 18 East West
1200 feet from S N (circle one) Line of Section
1900 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Mildred Koegler 1 Well #: 1

Field Name: _____

Producing Formation: Cherokee Coal

Elevation: Ground: 970 ft. Kelly Bushing: _____

Total Depth: 1,063 ft. Plug Back Total Depth: 1,052 ft.

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 Surface

feet depth to 1,059 ft. w/ 155 sx cmt.

Drilling Fluid Management Plan Approved 10-3-03

(Data must be collected from the Reserve Pit)

Chloride content N/A ppm Fluid volume N/A 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: Robert Cole

Title: Sr. Eng. Tech. Date: 9/23/03

Subscribed and sworn to before me this 23rd day of September, 2003

Notary Public: Kim Walker

Date Commission Expires: 12/8/05

KCC Office Use ONLY

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

COPY

Operator Name: Devon Energy Production Company, L.P. Lease Name: Mildred Koegler 1 Well #: 1
 Sec. 1 Twp. 30 S. R. 18 East West County: Neosho

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input checked="" 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 Attachments	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	RECEIVED SEP 29 2003 KCC WICHITA	
List All E. Logs Run: GR, N, D, DIL			

CASING RECORD <input checked="" type="checkbox"/> New <input 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	11"	8 5/8"	32 #/ft	20'	Portland	4	none
Production	7 7/8"	5 1/2"	14 #/ft	1,059'	Cl 'A'	155	ThickSet

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 <i>(Amount and Kind of Material Used)</i>	Depth
4 spf	958'-961'Riverton, 903'-905', 896'-899'Rowe	500glFeHCl, Frac359Bbls5,000lbs20/40Sd.	
4 spf	746'-749'Tebo, 676'-680'Flemming	500glFeHCl, Frac335Bbls4,000lbs20/40Sd.	
4 spf	638'-642'Croweberg, 615'-619'Bevier	500glFeHCl, Frac348Bbls5,000lbs20/40Sd.	
4 spf	531'-535'Mulky, 518'-522'Summit	500glFeHCl, Frac348Bbls5,000lbs20/40Sd.	

TUBING RECORD	Size 2 7/8"	Set At 1,002'-EOT	Packer At N/A	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 9/22/03	Producing Method <input checked="" type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. N/A	Gas Mcf 45 Mcfd	Water Bbls. 400 bwpd	Gas-Oil Ratio N/A	Gravity N/A
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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) _____