

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

Operator: License # 32654
Name: Jones Gas Corporation
Address: P O Box 970
City/State/Zip: Wichita, KS 67201-0970
Purchaser: Bonanza Energy
Operator Contact Person: George R. Jones
Phone: (316) 262-5503
Contractor: Name: Well Refined Drilling Company, Inc.
License: 33072
Wellsite Geologist: Dean E. Seeber

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. _____

8/12/02 8/13/02 8/20/02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-125-30142-0000
County: Montgomery
Ap. NE NE NW Sec. 33 Twp. 31 S. R. 15 East West
406 feet from S / N (circle one) Line of Section
2914 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: H. McDaniel Well #: 2
Field Name: Jefferson-Sycamore
Producing Formation: Mulky
Elevation: Ground: 854' Kelly Bushing: _____
Total Depth: 1293' Plug Back Total Depth: 1273'
Amount of Surface Pipe Set and Cemented at 23 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 23'
feet depth to Surface w/ 4 sx cmt.

Drilling Fluid Management Plan ALL IN 9-24-02
(Data must be collected from the Reserve Pit) AIR DRILL
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: GR Jones
Title: President Date: 9/05/02
Subscribed and sworn to before me this 5th day of September,
19X 2002
Notary Public: Cindy Jones
Date Commission Expires: 5-15-2003

CINDY JONES

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

Operator Name: Jones Gas Corporation Lease Name: H. McDaniel Well #: 2
 Sec. 33 Twp. 31 S. R. 15 East West County: Montgomery

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: Neutron Density Porosity Log Radioactivity Log	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:20%;">Log Name</th> <th style="width:50%;">Formation (Top), Depth and Datum</th> <th style="width:30%;">Sample Datum</th> </tr> </thead> <tbody> <tr> <td>Pawnee</td> <td>737</td> <td>+118</td> </tr> <tr> <td>Mulky</td> <td>884</td> <td>-29</td> </tr> <tr> <td>Riverton</td> <td>1238</td> <td>-383</td> </tr> <tr> <td>Mississippi</td> <td>1253</td> <td>-398</td> </tr> </tbody> </table>	Log Name	Formation (Top), Depth and Datum	Sample Datum	Pawnee	737	+118	Mulky	884	-29	Riverton	1238	-383	Mississippi	1253	-398
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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	12.250	8 5/8"	23#	23'	Portland	4	
Production	6 3/4"	4 1/2"	10.5#	1290'	50-50 POZ	200	2% gel, 5% salt
							5% gil

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
4	888-894'	300 gal 15% acid, 25 balls, breakdown 1900#, 140 bbl water pad 390 bbls 20# gel, 12000# 20-40 sd, 3000#12-20 sd, treating press 1100# Shut in Pressure 850#	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	875'	None	Yes No

Date of First, Resumed Production, SWD or Enhr.		Producing Method			
		Flowing	<u>Pumping</u>	Gas Lift	Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		40	100		

Disposition of Gas METHOD OF COMPLETION Production Interval 888-894'

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify) _____

