

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

Operator: License # 32704

Name: GAS TRANSMISSION ORGANIZATION, INC.

Address: 3838 OAK LAWN AVE., SUITE 910

City/State/Zip: DALLAS, TX 75219

Purchaser: _____

Operator Contact Person: DANNY W. LOONEY

Phone: (214) 526-6644

Contractor: Name: McPHERSON DRILLING

License: #5495

Wellsite Geologist: JIM CRAIG

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW **RECEIVED**

Dry Other (Core, WSW, Explosives, Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____ **AUG 27 2002**

Well Name: _____

Original Comp. Date: _____ Original Total Depth WICHITA, KS

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back Plug Back Total Depth

Comingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Enhr.?) Docket No. _____

8/12/01 8/14/01 7/18/02

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 035-24141-0000

County: COWLEY

SE SW4 Sec. 13 Twp. 33 S. R. 4 East West

500 feet from S / N (circle one) Line of Section

3300 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: BORN Well #: 4

Field Name: _____

Producing Formation: ADMIRE

Elevation: Ground: 1255 Kelly Bushing: _____

Total Depth: 780' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 61 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AIR RIG

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Evaporate & Back Fill

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter Sec. Twp. S. R. East West

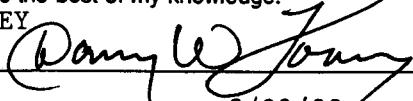
County: _____ Docket No.: _____

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.

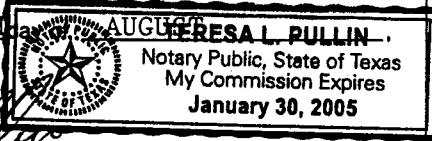
DANNY W. LOONEY

Signature: _____



Title: AGENT Date: 8/23/02

Subscribed and sworn to before me this 23rd day of AUGUST, 2002.



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Notary Public: 

Operator Name: GAS TRANSMISSION ORGANIZATION, Inc. Lease Name: BORN Well #: 4
 Sec. 13 Twp. 33 S. R. 4 East West County: COWLEY

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 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
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Datum
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Red Eagle Lime Fall City Lime Admire Sand	DEPTH 475 685 707
List All E. Logs Run:			SUB-SEA +780 +570 +548
No open hole logs run. Only cased hole Gamma Ray Neutron logs run.			

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	# Sacs Used	Type and Percent Additives
SURFACE	8 3/4"	7"	23#	61'	Class A	40 sks	3% CaCl2
PRODUCTION	6 1/4"	4 1/2"	9.5#	780'	Class A	70 sks	1/4# Floseal

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: — Perforate — Protect Casing — Plug Back TD — Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

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 s/f	706 - 716'	300 gals	Hydrochloric Acid	706'

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

Date of First, Resumed Production, SWD or Enhr.	Producing Method	<input checked="" type="checkbox"/> Flowing	<input type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain)
8/8/02					

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	0	5/MCF	0			

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(If Other (Specify) _____)</i>	