

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

Operator: License # 33264
Name: Central Production Co. Inc.
Address: 718 Oak Street
City/State/Zip: Humboldt, KS 66748
Purchaser: _____
Operator Contact Person: Gilbert McGown
Phone: (620) 473-2411
Contractor: Name: David Casey
License: 33274
Wellsite Geologist: Eric Arro
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core) WSW, Expl., Cathodic, etc)

RECEIVED

AUG 06 2003

KCC WICHITA

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 7/15/03 Date Reached TD 7/17/03 Completion Date or Recompletion Date 7/18/03

API No. 15 - 099-23284.00.00
County: Labette
 NE SE NW Sec 10 Twp 35 S. R. 21 East West
1716 feet from S / (N) (circle one) Line of Section
2812 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Wakefield Well #: C1
Field Name: Chetopa
Producing Formation: _____
Elevation: Ground: 836' Kelly Bushing: _____
Total Depth: 170' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at _____ 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
(Data must be collected from the Reserve Pit)
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: [Signature]
Title: geologist Date: 8/4/03
Subscribed and sworn to before me this 8 day of August
2003
Notary Public: Anjelica S. Hanson
Date Commission Expires: 10/22/05

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

ANJELICA S. HANSON
NOTARIAL SEAL - STATE OF IOWA
COMMISSION NUMBER 719168
MY COMMISSION EXPIRES 10/22/05