

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Paul

Operator: License # 30717

Name: DOWNING-NELSON OIL CO., INC.

Address: P.O. Box 372

City/State/Zip: Hays, KS 67601

Purchaser: _____

Operator Contact Person: Ron Nelson

Phone: (785) 628-3449

Contractor: Name: Discovery Drilling Co., Inc.

License: 31548

Wellsite Geologist: Ron Nelson

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>5/14/04</u>	<u>5/20/04</u>	<u>5/21/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 195-22,252-00-00

County: Trego
280' N & 20' W OF
NE-NW-SW Sec. 16 Twp. 13 S. R. 21W East West

2590 feet from S (circle one) Line of Section

970 feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Keller-Keller Well #: 1-16

Field Name: Wildcat

Producing Formation: None

Elevation: Ground: 2187 Kelly Bushing: 2195

Total Depth: 4008 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 222.42 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 10,000 ppm Fluid volume 80 bbls

Dewatering method used Haul free fluid

Location of fluid disposal if hauled offsite: _____

Operator Name: BLACKHAWK PRODUCTION COMPANY

Lease Name: Calvert SWD License No.: 32504

Quarter SW/4 Sec. 14 Twp. 13 S. R. 20W East West

County: Ellis Docket No.: D-27-326

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: Ron Nelson

Title: PRESIDENT Date: 7-23-04

Subscribed and sworn to before me this 23rd day of July

2004!

Notary Public: Chris Schneider

Date Commission Expires: 8-20-07

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

CHRIS SCHNEIDER
Notary Public - State of Kansas
My Appt. Expires 8/20/07

Operator Name: DOWNING-NELSON OIL CO., INC. Lease Name: Keller-Keller Well #: 1-16
 Sec. 16 Twp. 13 S. R. 21W East West County: Trego

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: <u>CNL/GR, Microlog</u> <u>Dual Induction</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Top Anhy.</td> <td>1589</td> <td>+608</td> </tr> <tr> <td>Base</td> <td>1628</td> <td>+569</td> </tr> <tr> <td>Topeka</td> <td>3264</td> <td>-1067</td> </tr> <tr> <td>Heebner</td> <td>3492</td> <td>-1295</td> </tr> <tr> <td>LKC</td> <td>3528</td> <td>-1331</td> </tr> <tr> <td>BKc</td> <td>3772</td> <td>-1575</td> </tr> <tr> <td>Marmaton</td> <td>3848</td> <td>-1651</td> </tr> <tr> <td>Cherokee Sh.</td> <td>3890</td> <td>-1693</td> </tr> <tr> <td>Arbuckle</td> <td>NR</td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Top Anhy.	1589	+608	Base	1628	+569	Topeka	3264	-1067	Heebner	3492	-1295	LKC	3528	-1331	BKc	3772	-1575	Marmaton	3848	-1651	Cherokee Sh.	3890	-1693	Arbuckle	NR	
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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 Pipe	12 1/4	8 5/8	20	222.42	Common	150	2%Gel & 3%CC

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		Acid, Fracture, Shot, Cement Squeeze Record		Depth
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		
	D&A				

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 type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____