

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 30606

Name: Murfin Drilling Co., Inc.

Address 250 N. Water, Suite 300

City/State/Zip Wichita, KS 67202 **KCC**

Purchaser: Genesis

Operator Contact Person: Larry M. Jack JUN 19 2001

Phone (316) 267-3241 **CONFIDENTIAL**

Contractor: Name: Murfin Drilling Co., Inc.

License: 30606

Wellsite Geologist: Curtis Covey

Designate Type of completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

9/22/00 10/01/00 1/12/01

Spud Date Date Reached TD Completion Date

API NO. 15- 167-23,1790000

County Russell

S/2 - SE - Sec. 28 Twp. 14S Rge. 13W E W

660 S Feet from S (circle one) Line of Section

1320 E Feet from E (circle one) Line of Section

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

Lease Name Carter Colliver #1 CO2 I Well # #1

Field Name Hall Gurney

Producing Formation LKC, Arbuckle

Elevation: Ground 1728' KB 1733'

Total Depth 3115' PBTD _____

Amount of Surface Pipe Set and Cemented at 1435 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 0

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Re 1 2/17/02
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

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 on 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 Larry M. Jack
Title Larry M. Jack, Production Manager Date 1/24/01
Subscribed and sworn to before me this 24th day of January 2001
Notary Public Barbara J. Dodson
Date Commission Expires 12-16-03

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

Operator name Murfin Drilling Co., Inc.

SIDE TWO

Sec. 28 Twp. 14 Rge. 13 East West

Lease Name Carter Colliver #1 CO2 I Well # 1

County Russell

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken *DPW* Yes No
(Attach Additional Sheets.)

Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey Yes No

Name Top Datum

Cores Taken Yes No

SEE ATTACHED

Electric Log Run Yes No

(Submit Copy.)

List all E.Log

Repeat Formation Test Gamma Ray; Borehole

Compensated Sonic Gamma Ray

Platform Express Microlog Gamma Ray; Platform Express Compensated Neutron Litho Density/GR

Platform Express Array Induction Linear Correlation/S; Geologic Report Log

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 1/4"	8 5/8"	24#	1435'	Common	650	3% cc 2% gel
Production	7.875	5 1/2"	15#	3114'	A-Con Blend AA2	160 sx lead & 100 sx tail	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: _ Perforate _ Protect Csg _ Plug Back TD _ Plug Off Zone	Depth Top/Btm	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
4	2891-99'		

TUBING RECORD	Size <u>2 3/8"</u> Set At <u>2917.70'</u> Packer At	Liner <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. <u>1/13/01</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other
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Estimated Production Per 24 Hours	Oil <u>1</u> Bbls	Gas <u> </u> Mcf	Water <u>35</u> Bbls.	Gas-Oil Ratio	Gravity
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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, submit ACO-18.) Other (Specify)