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JUN 11 2002

KCC WICHITA

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

ORIGINAL

Operator: License # 33022
Name: Rock Exploration, LLC
Address: P.O. Box 406
City/State/Zip: Victoria, Kansas 67671-0406
Purchaser: _____
Operator Contact Person: Joseph A. Dinkel
Phone: (785) 625-5266
Contractor: Name: Vonfeldt Drilling, Inc.
License: 9431
Wellsite Geologist: Duane P. Stecklein

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>4-17-2002</u>	<u>4-23-2002</u>	<u>4-23-2002</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-051251270000
County: Ellis
SE,NW,SW Sec. 29 Twp. 15 S. R. 17 East West
1590' feet from N (circle one) Line of Section
940' feet from E / W (circle one) Line of Section

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

Lease Name: Stecklein Well #: A1

Field Name: Wheatland South

Producing Formation: None

Elevation: Ground: 1962' Kelly Bushing: 1967'

Total Depth: 3555' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 1112' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1112'

feet depth to Surface w/ 450 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 59,000 ppm Fluid volume 400 bbls
Dewatering method used Allow to dry and backfill

Location of fluid disposal if hauled offsite:

Operator Name: Stecklein Oil

Lease Name: Pivonka License No.: 5127

Quarter _____ Sec. 22 Twp. 15 S. R. 18 East West

County: Ellis 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: Rock Exploration, LLC
by Joseph A. Dinkel

Title: operator Date: 6-10-2002

Subscribed and sworn to before me this 10 day of June

2002

Notary Public: Greg J. Pfanzagl

Notary Commission Expires: 3-4-2006



KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Rock Exploration, LLC Lease Name: Stecklein Well #: A1
 Sec. 29 Twp. 15 S. R. 17 East West County: Ellis

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> 1st All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Topeka</td> <td>2932</td> <td>-965</td> </tr> <tr> <td>Heebner</td> <td>3219</td> <td>-1252</td> </tr> <tr> <td>L-KC</td> <td>3270</td> <td>-1303</td> </tr> <tr> <td>B-KC</td> <td>3497</td> <td>-1530</td> </tr> <tr> <td>Cong.-Chert</td> <td>3515</td> <td>-1548</td> </tr> <tr> <td>Cong.-Sand</td> <td>3537</td> <td>-1570</td> </tr> <tr> <td>R.T.D.</td> <td>3555</td> <td>-1588</td> </tr> </table>	Name	Top	Datum	Topeka	2932	-965	Heebner	3219	-1252	L-KC	3270	-1303	B-KC	3497	-1530	Cong.-Chert	3515	-1548	Cong.-Sand	3537	-1570	R.T.D.	3555	-1588
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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	8 5/8"		24	1112'	Com	450	

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

IBING 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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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