

JUN 10 2004

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE KCC WICHITA

Operator: License # 5047
 Name: Rupe Oil Company, Inc.
 Address: PO Box 783010
 City/State/Zip: Wichita, Kansas 67278
 Purchaser: _____
 Operator Contact Person: Becky
 Phone: (316) 689-3520
 Contractor: Name: Duke Drilling Co., Inc.
 License: 5929
 Wellsite Geologist: Jim Musgrove
 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>01-22-04</u>	<u>01-26-04</u>	<u>04/27/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 053-21124-00-00
 County: Ellsworth County, Kansas
SW NW/4 Sec. 27 Twp. 16 S. R. 7 East West
3300 feet from S N (circle one) Line of Section
660 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Reed Well #: 1-27
 Field Name: Empire
 Producing Formation: _____
 Elevation: Ground: 1598' Kelly Bushing: 1606'
 Total Depth: 1910' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 238.98 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.

If 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: Owner Date: 6/8/04
 Described and sworn to before me this 9th day of June, 2004
 Public: Teresa U. Mendenhall
 Commission Expires: 1/19/2008

TERESA U. MENDENHALL
 Notary Public - State of Kansas
 My Appt. Expires 1/19/2008

KCC Office Use ONLY

ND Letter of Confidentiality Attached
 If Denied, Yes Date: RECEIVED
 Wireline Log Received
 Geologist Report Received JUN 10 2004
 UIC Distribution
KCC WICHITA

Operator Name: Rupe Oil Company, Inc. Lease Name: Reed Well #: 1-27
 Sec. 27 Twp. 16 S. R. 7 East West County: Ellsworth County, Kansas

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: <div style="text-align: center;">Dual Induction and Compensated Density Neutron Log</div>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Herington</td> <td>1001</td> <td>+605</td> </tr> <tr> <td>Winfield</td> <td>1050</td> <td>+556</td> </tr> <tr> <td>Red Eagle</td> <td>1584</td> <td>+22</td> </tr> <tr> <td>Grand Haven</td> <td>1794</td> <td>-188</td> </tr> </tbody> </table>	Name	Top	Datum	Herington	1001	+605	Winfield	1050	+556	Red Eagle	1584	+22	Grand Haven	1794	-188
Name	Top	Datum														
Herington	1001	+605														
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CASING RECORD <input 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	12-1/4"	8-5/8"	23#	238.98'	Common	165	3%cc 2%gel
Production	7-7/8"	4-1/2"	11.60#	1908'	ASC	175	

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 <i>(Amount and Kind of Material Used)</i>	Depth
1816-20	Grand Haven		
1802-12	Grand Haven		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	1833		<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)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
		135	none		

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