

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

Operator: License # 30537  
Name: Venture Resources, Inc.  
Address: P.O. Box 101234  
City/State/Zip: Denver CO 80250  
Purchaser: NCRA  
Operator Contact Person: Ronald T. Mackey  
Phone: ( 303 ) 722-2899  
Contractor: Name: \_\_\_\_\_  
License: Dohrman  
Wellsite Geologist: \_\_\_\_\_

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: Venture Resources, Inc.  
Well Name: #2 Dohrman  
Original Comp. Date: 10-18-93 Original Total Depth: 3320'  
\_\_\_\_ 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. E-28,126

02/05/03  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 159-22339-000  
County: Rice  
N/2 NE NW Sec. 26 Twp. 18 S. R. 10  East  West  
4950 feet from S N (circle one) Line of Section  
3300 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Dohrman Well #: 2  
Field Name: Orth  
Producing Formation: Arbuckle  
Elevation: Ground: 1748 Kelly Bushing: na  
Total Depth: 3320 Plug Back Total Depth: 3280  
Amount of Surface Pipe Set and Cemented at 259 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from \_\_\_\_\_  
feet depth to 259 w/ 175 sx cmt.

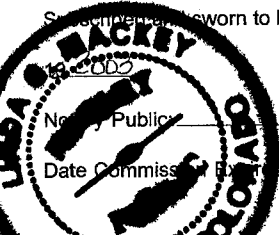
Drilling Fluid Management Plan Whereas See 3-26-08  
(Data must be collected from the Reserve Pit)  
Chloride content NA ppm Fluid volume NA bbls  
Dewatering method used NA  
Location of fluid disposal if hauled offsite:  
Operator Name: NA  
Lease Name: NA License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ 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: \_\_\_\_\_  
Title: PRESIDENT Date: 3-18-03

Subscribed and sworn to before me this 18<sup>th</sup> day of March,  
2003  
Notary Public: Linda G. Mackey  
Date Commission Expires: \_\_\_\_\_  
Notary Public State Of Colorado  
My Commission Expires: 9/21/2006



**KCC Office Use ONLY**  
NO Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
NO Wireline Log Received  
NO Geologist Report Received  
\_\_\_\_ UIC Distribution

Operator Name: Venture Resources, Inc. Lease Name: Dohrman Well #: 2  
 Sec. 26 Twp. 18 S. R. 10 East  West County: Rice

**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 No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes No <i>(Submit Copy)</i>  List All E. Logs Run:  Dual Induction/Compenstated Density/Neutron On file with KCC	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:10%;"><input checked="" type="checkbox"/> Log</th> <th style="width:60%;">Formation (Top), Depth and Datum</th> <th style="width:30%;">Sample</th> </tr> <tr> <td></td> <td>Name Top Datum</td> <td></td> </tr> <tr> <td></td> <td>Heebner 2766 -1013</td> <td></td> </tr> <tr> <td></td> <td>LKC 2916 -1163</td> <td></td> </tr> <tr> <td></td> <td>Arbukle 3266 -1513</td> <td></td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	Sample		Name Top Datum			Heebner 2766 -1013			LKC 2916 -1163			Arbukle 3266 -1513	
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	Name Top Datum															
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CASING RECORD <span style="float: right;">New <input checked="" type="checkbox"/> Used</span>							
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"	19#	259	60/40 poz	175	3%cc/2%gel
Production	7 7/8"	5 1/2"	10.5#	3317'	40/60 poz	150	2%gel

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
4	3266-3271	200 gals. 15% MCA	3266-71

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8" Seal-t	3224'	3225'	Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method		
02/25/03		Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) <input type="checkbox"/>		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	NA			

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 type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____