

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form AGO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6039
Name: L. D. DRILLING, INC.
Address: R.R. 1 BOX 183 B
City/State/Zip: GREAT BEND, KANSAS 67530
Purchaser: Genesis Crude Oil LP

Operator Contact Person: L. D. Davis
Phone: (316) 793-3051
Contractor: Name: L. D. DRILLING, INC.

License: 6039
Wellsite Geologist: Kim Shoemaker

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: _____
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. _____

9-30-00 10-06-00 10-13-00
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-24681
County: BARTON

SW NE NW Sec. 1 Twp. 19 S. R. 15 East West
990 feet from S N (circle one) Line of Section
1650 feet from E W (circle one) Line of Section

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

Lease Name: WIEDEMANN Well #: 5
Field Name: Otis/Albert

Producing Formation: Arbuckle
Elevation: Ground: 1934 Kelly Bushing: 1939

Total Depth: 3550' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 913' 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/ _____ ex omt.

Drilling Fluid Management Plan ALT 1 gN 01-12-01
(Data must be collected from the Reserve PR)

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.

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: Bessie DeWerff
Title: Sec/Treas Date: 12-06-00
Subscribed and sworn to before me this 6th day of December

Notary Public: Rashell Patten
Date Commission Expires: 2-02-03

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received
 Geologist Report Received
 UIC Distribution

IOG



Operator Name: L. D. DRILLING, INC. Lease Name: WIEDEMANN Well #: 5
 Sec. 1 Twp. 19 S. R. 15 East West County: BARTON

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Gama Ray / Neutron
 CEMENT BOND

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

SEE ATTACHMENT

CASING RECORD <input checked="" type="checkbox"/> Now <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./FL	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
surface	12 1/4"	8 5/8"	28#	913'	60/40 Poz	400	2% Gel, 3% c
production	7 7/8"	4 1/2"	14#	3541'	ACS	175	10% salt, 5% Kols .002 FI-10 500 gal. WFR-2

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
2 spf	3545-3555	500 gal FE Acid	3545-3555

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		2 3/8"	3547'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or Enhr.				Producing Method				
10-13-00				<input type="checkbox"/> Flowing <input checked="" 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			
	10		0					

Disposition of Gas Ventd Sold Used on Lease (If vented, Sumit ACC-18.)
 METHOD OF COMPLETION Open Hole Part. Dualy Comp. Commingled
 Other (Specify) _____
 Production Interval 3545'-3555'