

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 # 5205
Name: Mid-Continent Energy Corporation
Address: 105 S. Broadway, Suite 900
City/State/Zip: Wichita, KS 67202
Purchaser: Petro Source Corporation
Operator Contact Person: Bradley R. Buehler
Phone: (316) 265-9501
Contractor: Name: Shields Drilling Company
License: 5184
Wellsite Geologist: John Rose

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. _____

4/21/2000 4/30/2000 5/26/2000
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 135-24,104
County: Ness
SE SE NE Sec. 31 Twp. 19 S. R. 23 East West
2310 feet from S (circle one) Line of Section
330 feet from (circle one) E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
Lease Name: Stum Well #: 9

Field Name: Franklin
Producing Formation: Cherokee Sand

Elevation: Ground: 2278 Kelly Bushing: 2283
Total Depth: 4450 Plug Back Total Depth: 4448

Amount of Surface Pipe Set and Cemented at 301 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1612 Feet

If Alternate II completion, cement circulated from 1612'
feet depth to K.B. w/ 175 sx cmt.

Drilling Fluid Management Plan ALT 2 gfk 8/29/00
(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.

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: Bradley R. Buehler

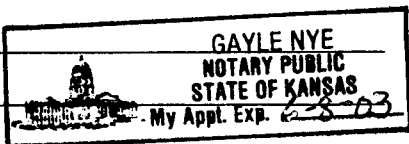
Title: Vice-President Date: August 1, 2000

Subscribed and sworn to before me this 1st day of August

~~19~~ 2000.

Notary Public: Gayle Nye

Date Commission Expires: 6-8-03



KCC Office Use ONLY

- Letter of Confidentiality Attached
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

LOG

Operator Name: Mid-Continent Energy Corp. Lease Name: Stum Well #: 9
 Sec. 31 Twp. 19 S. R. 23 East West County: Ness

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 checked="" type="checkbox"/> Yes <input 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: Cement Bond Log Dual Induction Compensated Neutron Density Gamma Ray Correlation Cement Bond Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>1532</td> <td>+751</td> </tr> <tr> <td>Heebner</td> <td>3698</td> <td>-1415</td> </tr> <tr> <td>Lansing</td> <td>3744</td> <td>-1461</td> </tr> <tr> <td>Fort Scott</td> <td>4258</td> <td>-1975</td> </tr> <tr> <td>Cherokee Sand</td> <td>4338</td> <td>-2055</td> </tr> <tr> <td>Miss. Rework</td> <td>4398</td> <td>-2115</td> </tr> <tr> <td>Mississippi</td> <td>4406</td> <td>-2123</td> </tr> </table>	Name	Top	Datum	Anhydrite	1532	+751	Heebner	3698	-1415	Lansing	3744	-1461	Fort Scott	4258	-1975	Cherokee Sand	4338	-2055	Miss. Rework	4398	-2115	Mississippi	4406	-2123
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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	# Sacjs Used	Type and Percent Additives
Surface		8 5/8	24 lb.	301'	60/40 poz	175	3% CC, 2% gel
Production	7 7/8	5 1/2	14 lb.	4448'	ASC	175	1% gel, .05% FRA

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				
	See Attached Sheet			

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
3	4340 - 4360, 20 feet	acidize w/1000 gal. 7 1/2%	4340 -60

TUBING RECORD	Size 2 7/8	Set At 4375	Packer At NA	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 5-25-00	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil 100 Bbls.	Gas Mcf	Water 0 Bbls.	Gas-Oil Ratio	Gravity 36°
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Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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