

Open

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 4894
Name: Horseshoe Operating, Inc.
Address: 110 W. Louisiana, Suite 200
City/State/Zip: Midland, Texas 79701

Purchaser: _____
Operator Contact Person: S. L. Burns/Debbie Franklin
Phone: (432) 683-1448
Contractor: Name: Cheyenne Drilling
License: 33375

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: _____
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. _____

8/17/05	8/18/05	10/06/05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 071-20819-0000

County: Greeley

C NE Sec. 24 Twp. 19 S. R. 40 East West
1320 feet from S / N (circle one) Line of Section
1320 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Floyd Well #: 4-24

Field Name: Bradshaw

Producing Formation: Winfield

Elevation: Ground: 3539 Kelly Bushing: 3545

Total Depth: 2888 Plug Back Total Depth: 2887

Amount of Surface Pipe Set and Cemented at 5 jts 240 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2888

feet depth to Surface w/ 550 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.

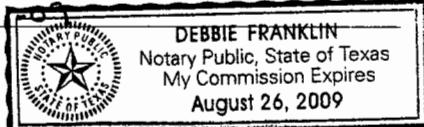
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: S. L. Burns
Title: Vice - President Date: 10/28/05

Subscribed and sworn to before me this 28 day of October,
2005.

Notary Public: Debbie Franklin

Date Commission Expires: 8-26-09



KCC Office Use ONLY	
<u>NO</u> Letter of Confidentiality Received	
If Denied, Yes <input type="checkbox"/> Date: _____	
_____ Wireline Log Received	
_____ Geologist Report Received	
_____ UIC Distribution	

RECEIVED

OCT 31 2005

KCC WICHITA

Operator Name: Horseshoe Operating, Inc. Lease Name: Floyd Well #: 4-24
 Sec. 24 Twp. 19 S. R. 40 East West County: Greeley

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name Base Stone Corral	Top 2485 Datum +1060
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Top Winfield	2820 +725
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E. Logs Run:			
Compensated Density Neutron & CBL			

CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacks Used	Type and Percent Additives
Surface	12-1/4	8-5/8	24#	240	Common	165	CC/Floseal
Production	7-7/8	4-1/2	11.6#	2888	Lite	550	"C"/Floseal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
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	2829	500 gals 15% HCL Acid + additives	
1	2830 - 2846	250 gals 7-1/2% HCL Acid	
		3500 gal pad	
		8000# 20/40 4000# 12/20	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	2-3/8	2863				
Date of First, Resumed Production, SWD or Enhr. 10/6/05		Producing Method <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.

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled _____ <input type="checkbox"/> Other (Specify) _____	RECEIVED OCT 31 2005 KCC WICHITA