

Sub

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 # 9687
Name: Wanda Smith
Address: PO Box 375
City/State/Zip: Syracuse, KS 67878
Purchaser: Oneok
Operator Contact Person: Wanda Smith
Phone: (620) 384-6914 **RECEIVED**
Contractor: Name: NA **JUN 14 2004**
License: NA
Wellsite Geologist: NA **KCC WICHITA**

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: American Continental Energy
Well Name: Raymond # 1
Original Comp. Date: never completed Original Total Depth: 3100
 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. _____

Spud Date or 3/15/04
Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 093-20766
County: Kearny **37 W**
C - SE - Sec. 3 Twp 22 S. R. 34 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: Raymond Well #: 1
Field Name: Panoma Gas Area
Producing Formation: Council Grove
Elevation: Ground: 3243' Kelly Bushing: 3254'
Total Depth: 3100 Plug Back Total Depth: 3065
Amount of Surface Pipe Set and Cemented at 300 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set NA Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx crnt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) unknown
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: Wanda M. Smith, Wanda Smith
Title: Owner Date: 6-10-04
Subscribed and sworn to before me this 10th day of June,
2004.
Notary Public: Angie Seuffer
Date Commission Expires: 02-25-07

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

ANGIE SEUFFER
Notary Public - State of Kansas
My Appt. Expires 2-25-07

Operator Name: Wanda Smith Lease Name: Raymond Well #: 1
 Sec. 3 Twp. 22 S. R. 34 East West County: Kearny

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: GRC, CCL, CBL

Log Formation (Top), Depth and Datum Sample
 Name Council Grove Top 2886' Datum

RECEIVED
 JUN 14 2004
 KCC WICHITA

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	# Sacks Used	Type and Percent Additives
		8 5/8"		300	NA	NA	
		5 1/2"		3086	cmt to surface		

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	2920-32'		
2	2890-96'		
2	2876-86'	All frac together w/ 1120 bbls gel wtr and sand	

TUBING RECORD		Size	Set At	Packer At	Liner Run
<u>87 jts</u>		<u>2 3/8"</u>	<u>2816'</u>	<u>2816'</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		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.	Gas-Oil Ratio	Gravity
		<u>50 mcf/d</u>			

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify) _____

Shut in after frac & will sell down sales line after well hookup.