

COPY

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Of tor: License # 32198Name: PETROSANTANDER (USA) INCAddress 6363 WOODWAY suite 350City/State/Zip HOUSTON, TEXAS 77057Purchaser: NAOperator Contact Person: JASON SIZEOREPhone (713) 784-8700Contractor: Name: ABERCROMBIE RTD, INCLicense: 30684Wellsite Geologist: WESLEY HANSEN

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ WorkoverOil ☐ SWD ☐ SIOW ☐ Temp. Abd.Gas ☐ ENHR ☐ SIGW☒ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc)

If Workover: _____

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening ☐ Re-perf. ☐ Conv. to Inj/SWDPlug Back ☐ PBTBCommingled ☐ Docket No. _____Dual Completion ☐ Docket No. _____Other (SWD or Inj?) ☐ Docket No. _____

02/27/2000 03/04/2000 03/05/2000

Spud Date Date Reached TD Completion Date

API NO. 15- 055-21667County FINNEY- E/2 - AN - SE Sec. 11 Twp. 23S Rge. 31 X W1950 Feet from S (circle one) Line of Section1707 Feet from E (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name SHERMAN STEWART TRUST Well # SHERMAN STEWART TRUST 1Field Name STEWARTProducing Formation NONEElevation: Ground 2873' KB 2878'Total Depth 4900' PBTB _____Amount of Surface Pipe Set and Cemented at 493' FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan P4-A, 5-4-00 U.C.
(Data must be collected from the Reserve Pit)Chloride content 14,000 ppm Fluid volume 1400 bblsDewatering method used EVAPORATION

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S Rng. E/W

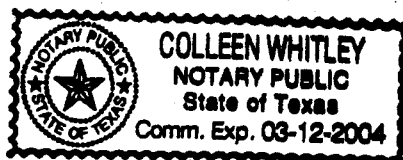
County _____ Docket No. _____

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 on 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 [Signature]Title Vice-President, Operations Date 2/21/2000Subscribed and sworn to before me this 21st day of March, 20 00.Notary Public [Signature]Date Commission Expires 3-12-2004

| K.C.C. OFFICE USE ONLY | | |
|------------------------------|-------------------------------------|--|
| F | <input checked="" type="checkbox"/> | Letter of Confidentiality Attached |
| C | <input checked="" type="checkbox"/> | Wireline Log Received |
| C | <input type="checkbox"/> | Geologist Report Received |
| Distribution | | |
| <input type="checkbox"/> KCC | <input type="checkbox"/> SWD/Rep | <input type="checkbox"/> NGPA |
| <input type="checkbox"/> KGS | <input type="checkbox"/> Plug | <input type="checkbox"/> Other (Specify) |



Form ACO-1 (7-91)

COPY

Operator Name PETROSANTANDER (USA) INCLease Name SHERMAN TRUSTWell # SHERMAN TRUST 1☐ EastCounty FINNEYSec. 11 Twp. 23S Rge. 31☒ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheets if more space is needed. Attach copy of log.

Drill Stem Tests Taken ☒ Yes ☐ No
(Attach Additional Sheets.)Samples Sent to Geological Survey ☐ Yes ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☒ Yes ☐ No
(Submit Copy.)List ALL E Logs run
DUAL INDUCTION
MICROLOG
COMP NEUT DENS
SONIC☒ Log Formation (Top), Depth and Datums ☐ Sample

| Name | Top | Datum |
|----------------|-------|--------|
| HEEBNER | 3981' | -1103' |
| LANSING | 4069' | -1191' |
| PAWNEE | 4592' | -1714' |
| CHEROKEE SHALE | 4638' | -1760' |
| MORROW SHALE | 4769' | -1891' |
| MORROW SAND | 4773' | -1895' |
| MISSISSIPPI | 4795' | -1917' |
| LTD | 4897' | -2019' |

CASING RECORD

☒ New ☐ 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 of Additives |
|-------------------|-------------------|---------------------------|-----------------|---------------|----------------|--------------|-------------------------------|
| SURFACE | 12-1/4" | 8-5/8" | 24# | 493' | LITE/Common | 200/100 | 2% cc/2% cc |
| | | | | | | | |
| | | | | | | | |

ADDITIONAL CEMENTING/SQUEEZE RECORD YES

| 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 |
|----------------|---|---|-------|
| | | | |
| | | | |
| | | | |
| | | | |

| TUBING RECORD | Size | Set At | Packer At | Liner Run Yes <input type="checkbox"/> No <input type="checkbox"/> |
|---|------|--------|-----------|---|
| Date of First, Resumed Production, SWD or Inj | | | | |
| Producing Method | | | | |
| | | | | |

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| | N-A | | | | |

Disposition of Gas:

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

METHOD OF COMPLETION

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____

Production Interval

