

COPY *and*

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

Operator: License # 32198

Name: PETROSANTANDER (USA) INC

Address 6363 WOODWAY suite 350

City/State/Zip HOUSTON, TEXAS 77057

Purchaser: NA

Operator Contact Person: JASON SIZEMORE

Phone (713) 784-8700

Contractor: Name: _____

License: _____

Wellsite Geologist: NA

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: OLD WELL

Operator: SHARON RESOURCES

Well Name: HAAG ESTATE #2

Comp. Date 02/10/68 Old Total Depth 4849'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. E-27,138

02/24/98 Spud Date 03/13/98 Date Reached TD 03/13/98 Completion Date

API NO. 15- 055-20007-0001

County FINNEY

- C - NW - NE Sec. 12 Twp. 23S Rge. 31 X W

660 Feet from S (N) (circle one) Line of Section

1980 Feet from E (W) (circle one) Line of Section

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

Lease Name STEWART UNIT Well # HAAG ESTATE #2

Field Name STEWART

Injection
~~Formation~~ MORROW

Elevation: Ground 2869' KB 2873'

Total Depth 4849' PBTB 4808'

Amount of Surface Pipe Set and Cemented at 370 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/ _____ sx cmt.

Drilling Fluid Management Plan OW/NO 1-26-99 W.C.
(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 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

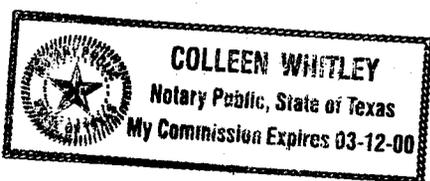
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature *Colleen Whitley*
Title Vice President of Operations Date 11/10/98
Subscribed and sworn to before me this 10th day of November
19 98.
Notary Public Colleen Whitley
Date Commission Expires 3-12-2000

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify) IS

Form ACO-1 (7-91)



COPY

Y900

25134

SIDE TWO

Operator Name PETROSANTANDER (USA) INC Lease Name STEWART UNIT Well # HAAG ESTATE #2

Sec. 12 Twp. 23S Rge. 31 East West
County FINNEY

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 sheet if more space is needed. Attach copy of log.

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:

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

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
SURFACE	12-1/2"	8-5/8"	28#	370	COMMON	250	
PRODUCTION	7-7/8"	5-1/2"	9.5#	4849	POZLITE 50/50	150	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3540 - 3798	THIXOTROPIC/CL 'H'	200	NEAT
	3411 - 3798	CLASS 'H'	100	0.6% HALAD 322

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	4766' - 4776'	ACID 1800 GAL 15%	
4	4766' - 4776'		
TUBING RECORD Size 2-3/8" Set At 4727' Packer At 4725'		Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Date of First, Resumed Production, SWD or Inj 04/02/98		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) INJECTION	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

NO PRODUCTION / INJECTION WELL

Disposition of Gas: METHOD OF COMPLETION Production Interval
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, submit ACO-18.) Other (Specify) _____