

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: _____

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: _____

Operator: PetroSantander (USA) Inc

Well Name: Mackey 9

Comp. Date 07/01/2000 Old Total Depth 4900'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. E-27138

12/12/00 12/20/00 12/20/00
Spud Date Date Reached TD Completion Date

API NO. 15- 055-21683 - 0001

County FINNEY

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

2050 Feet from S/N (circle one) Line of Section

165 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 # MACKEY-9

Field Name STEWART

Producing Formation MORROW

Elevation: Ground 2874' KB 2885'

Total Depth 4900' PBDT 4867'

Amount of Surface Pipe Set and Cemented at 475' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2085' Feet

If Alternate II completion, cement circulated from 2085'

feet depth to surface w/ 260 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 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 _____

Title Vice-President, Operations Date 01/08/2001

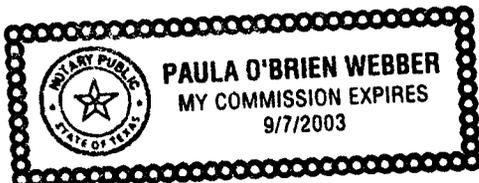
Subscribed and sworn to before me this 20th day of JANUARY, 2001.

Notary Public Paula O'Brien Webber

Date Commission Expires 9/7/2003

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)

Form ACO-1 (7-91)



RECEIVED
STATE CORPORATION COMMISSION

JAN 16 2001

CONSERVATION DIVISION

SIDE TWO

25159

Operator Name PETROSANTANDER (USA) INC Lease Name STEWART UNIT Well # MACKEY-9

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run (Submit Copy.) List ALL E Logs run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

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	# Sacks Used	Type and Percent Additives
SURFACE	12-1/4"	8-5/8"	24#	475'	LITE/CLASS C	200/100	2% cc/2% cc
PRODUCTION	7-7/8"	5-1/2"	15.5#	4900'	POZIMIX 50/50	325	2% cc

ADDITIONAL CEMENTING/SQUEEZE RECORD NONE				
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
4	4766' - 4781'		

TUBING RECORD	Size 2-7/8"	Set At 4724'	Packer At 4721'	Liner Run Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Date of First, Resumed Production, SWD or Inj	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	INJECTION <input type="checkbox"/>
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____