

And

FORM MUST BE TYPED

SIDE ONE

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

RECEIVED
JAN 14 2003

API NO. 15- 077-21443-0000

County Harper

C - NE - SW - Sec. 7 Twp. 32S Rge. 9W

1980 Feet from 37N (circle one) Line of Section

1980 Feet from E7W (circle one) Line of Section

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

Lease Name Stone Well # B-3

Field Name Sharon

Producing Formation Mississippi

Elevation: Ground 1466' KB 1477'

Total Depth 4461' PBTD NA

Amount of Surface Pipe Set and Cemented at 226 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cat.

Drilling Fluid Management Plan PHA's EOL 1-21-03
(Data must be collected from the Reserve Pit)

Chloride content 24,000 ppm Fluid volume 1,200 bbls

Dewatering method used Haul off free water

Location of fluid disposal if hauled offsite: _____

Operator Name Messenger Petroleum

Lease Name Nicholas SWD License No. 4706

NE Quarter Sec. 20 Twp. 30 S Rng. 8 E7W

County Kingman Docket No. D25073

Operator: License # 5429

Name: Bryce F. Hayes Oil & Gas

Address P.O. Box 108

City/State/Zip Attica, KS 67009-0108

Purchaser: _____

Operator Contact Person: Bryce F. Hayes

Phone (620) 254-7204

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: John Hastings

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD S10W Temp. Abd.
 Gas ENHR S16W
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

11-21-02 12-1-02 12-1-02
Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Bryce F. Hayes

Title Owner/Operator Date 1-13-03

Subscribed and sworn to before me this 13 day of January, 2003

Notary Public Carol F. Hayes

Date Commission Expires 1-15-2006

K.C.C. OFFICE USE ONLY		
F <u>NO</u>	Letter of Confidentiality Attached	
C <u>YES</u>	Wireline Log Received	
C <u>YES</u>	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)		

CAROL F. HAYES
Notary Public - State of Kansas
My Appt. Expires 1-15-2006

Operator Name Bryce F. Hayes Oil & Gas Lease Name Stone Well # B-3

Sec. 7 Twp. 32S Rge. 9 East West County Harper

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.

1 Test on GEO 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:
 Geological Log
 Dual Induction Log
 Dual Compensated Porosity Log

Name	Top	Datum
Heebner Sh.	3397'	-1920
Lansing	3613'	-2136'
Stark Sh.	4059'	-2582-
Cherokee Sh.	4290'	-2813'
Mississipian	4343'	-2866'
RTD	4460'	-2883'

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 Additives
Surface	12½"	8 5/8"	24	226	60/40 Poz	175	3% CC
None							

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

TUBING RECORD Size _____ Set At _____ Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain _____)

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

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 _____