

FORM MUST BE TYPED

file only

SIDE ONE

21-33-22W

COPY *me*

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

API NO. 15-025-21237-0000

County Clark

SW NE NW Sec. 21 Twp. 33 Rge. 22 X-W

834 Feet from S (circle one) Line of Section

1661 Feet from E (circle one) Line of Section

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

Lease Name Degnan Well # 1

Field Name Sitka

Producing Formation

Elevation: Ground 1790 KB 2000

Total Depth 5550 PBD 5554

Amount of Surface Pipe Set and Cemented at 17jts @ 616 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 cmt.

Drilling Fluid Management Plan P+A SH B 26 CA
(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.

Operator: License # 4874

Name: Horseshoe Operating, Inc.

Address 500 W. Texas, Suite 1190

City/State/Zip Midland, Tx 79701

Purchaser:

Operator Contact Person: S. L. Burns

Phone (915) 683-1448

Contractor: Name: Murfin Drilling Co.

License: 1140 - 1 2002

Wellsite Geologist: ROGER MARTIN

Designate Type of Completion

X New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

X Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator:

Well Name:

Comp. Date Old Total Depth

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBD

Commingled Docket No.

Dual Completion Docket No.

Other (SWD or Inj?) Docket No.

01/23/02 2/03/02 2.4.02

Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 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 *Shirley Z Burns*

Title Vice-President Date 2-26-02

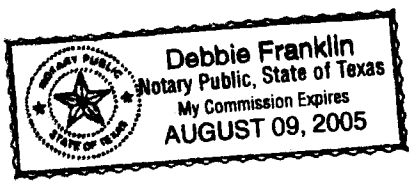
Subscribed and sworn to before me this 26 day of February, 2002

Notary Public *Debbie Franklin*

Date Commission Expires 8-9-2005

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 checked="" 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)



X

Operator Name Horseshoe Operating, Inc. Lease Name Degnan Well # 1

Sec. 21 Twp. 33 Rge. 22 East West

County Clark

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 checked="" type="checkbox"/> Yes <input 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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E-Logs Run:				
Compensated Neutron Density Log				

CASING RECORD <input type="checkbox"/> New <input checked="" 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	618	C	350	2% cc 1/4* flo
Production							

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

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

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) Well P & A _____

Production Interval _____