

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Jan

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5822
Name: VAL Energy Inc.
Address: 200 W. Douglas #520
City/State/Zip: Wichita, Ks. 67202
Purchaser: none
Operator Contact Person: K. Todd Allam
Phone: (316) 263-6688
Contractor: Name: VAL Energy Inc.
License: 5822
Wellsite Geologist: none

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/Re-entry: Old Well Info as follows:
Operator: C E Kimmell
Well Name: Reece Clark

Original Comp. Date: 6-30-87 Original Total Depth: 5260
 Deepening ____ Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back 5635 Plug Back Total Depth
____ Commingled Docket No. ____
____ Dual Completion Docket No. ____
 Other (SWD or Enhr.?) Docket No. ____

<u>1-17-2007</u>	<u>1-21-2007</u>	<u>2-13-2007</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-22156-00-01
County: Barber
C SE SE Sec. 13 Twp. 34 S. R. 11 East West
680 631 feet from S / N (circle one) Line of Section
660 643 feet from E / W (circle one) Line of Section
GPS-KCC-DIG
Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Meyer Well #: 1-SWD
Field Name: _____
Producing Formation: Prod.- Miss. Disposal -Abrubckle
Elevation: Ground: 1362 Kelly Bushing: 1372
Total Depth: 5635 Plug Back Total Depth: 5635
Amount of Surface Pipe Set and Cemented at 338 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
(Data must be collected from the Reserve Pit)
Chloride content 58000 ppm Fluid volume 500 bbls
Dewatering method used Hauled free fluids
Location of fluid disposal if hauled offsite:
Operator Name: Benco
Lease Name: Cole SWD License No.: 32613
Quarter NW Sec. 25 Twp. 32 S. R. 12 East West
County: Barber Docket No.: D 19886

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 of 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: Todd Allam
Title: President Date: 3/12/07
Subscribed and sworn to before me this 12 day of March
20 07.
Notary Public: Brandi Wyer
Date Commission Expires: _____

NOTARY PUBLIC - State of Kansas
BRANDI WYER
My Appt. Expires 2/24/2010

KCC Office Use ONLY
N Letter of Confidentiality Received
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received **RECEIVED**
____ UIC Distribution KANSAS CORPORATION COMMISSION
APR 03 2007

CONSERVATION DIVISION
WICHITA, KS

164888

Operator Name: VAL Energy Inc. Lease Name: Meyer Well #: 1-SWD
 Sec. 13 Twp. 35 S. R. 11 East West County: Barber

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input checked="" 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	Arbuckle	5320 -3958
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run:			

Sector Bond Log/Gamma Ray

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		338	previously set		
Production	7 7/8	5 1/2	15.5	5367	AA-2	175	

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 <i>(Amount and Kind of Material Used)</i>	Depth
	OH 5367-5635	2000 gal 15% HCL	5367-5635

TUBING RECORD	Size 2 7/8	Set At 5350	Packer At 5350 5346	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 3-1-2007	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input checked="" type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input checked="" type="checkbox"/> Other (Specify) <u>disposal well</u>	

RECEIVED
KANSAS CORPORATION COMMISSION
APR 03 2007