

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACC-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

COPY

Operator: License # 7744
Name: SHO-BAR ENERGY INC.
Address: 346 E. HWY 160
City/State/Zip: HARPER KS. 67068
Purchaser: DUKE ENERGY(GAS) LINK ENERGY(OIL)

Operator Contact Person: HOWARD SHORT
Phone: (620) 896-2710
Contractor: Name: ALLEN DRILLING CO. **RECEIVED**

License: 5418 Wellsite Geologist: ARDEN RATZLAFF JAN 21 2004

Designate Type of Completion: **KCC WICHITA**
 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: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth _____
 Casingried Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

10/04/03	10/20/03	10/31/03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 119.21117.00-00

County: MEADE

CE SE NW Sec. 8 Twp. 35 S. R. 26 East West
1980 feet from S N (circle one) Line of Section
2310 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: SUTHERLAND Well #: 2-8

Field Name: CROOKED CREEK

Producing Formation: **MORROW AND MISSISSIPPI**

Elevation: Ground: 2094 Kelly Bushing: 2104

Total Depth: 6360 Plug Back Total Depth: 6030

Amount of Surface Pipe Set and Cemented at 1545 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 4000 ppm Fluid volume _____ bbls

Dewatering method used **EVAPORATION**

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter Sec. Twp. S. R. East West

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 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.

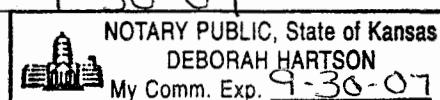
Signature: Howard Short

Title: PRESIDENT Date: 1/14/04

Subscribed and sworn to before me this 14 day of JANUARY,
2004.

Notary Public: Deborah Hartson

Date Commission Expires: 9-30-07



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: SHO-BAR ENERGY INC. Lease Name: SUTHERLAND Well #: 2-8
 Sec. 8 Twp. 35 S. R. 26 East West County: MEADE

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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name HEEBNER	Top 4464 Datum 2260
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	LANSING	4549 2343
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CHEROKEE	5576 3372
List All E. Logs Run:		MORROW (UPPER)	5932 3728
CDL / CNL / MEL / DIL		MORROW (LOWER)	5997 3793
		CHESTER	6026 3822
		ST GENEVIEVE	6502 4298

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
CONDUCTOR	30"	20"	75#	35'	GROUT	4 1/2 YD	
SURFACE	12 1/4"	8 5/8"	24#	1545'	CLASS A	900	2% GEL 3%CC
PRODUCTION	7 5/8"	4 1/2"	11.6#	6302'	CLASS H	200	

ADDITIONAL CEMENTING / SQUEEZE RECORD							
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives			
Perforate							
Protect Casing							
Plug Back TD							
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
4SPF	6206-14 6196-6200				1200 GAL 15% FE		
4SPF	6110-15 6084-86 6042-52 6036-40 CIBP 6180				200 GAL 15% FE		
4SPF	6010-12 CIBP 6030				500 GAL FE/NE		
4SPF	6002-06				7 1/2% HCL 2% KCL		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	2 3/8"	5913				

Date of First, Resumed Production, SWD or Enhr. 01/02/04	Producing Method	<input type="checkbox"/> Flowing	<input checked="" 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	METHOD OF COMPLETION			Production Interval		
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole	<input checked="" type="checkbox"/> Perf.	<input type="checkbox"/> Dually Comp.	<input checked="" type="checkbox"/> Commingled	MORROW	MISSISSIPPI