

ORIGINAL

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

RECEIVED
KANSAS CORPORATION COMMISSION
Form ACO-1
September 1999
Form Must Be Typed
SEP 25 2002

Operator: License # 33019
Name: Rosewood Resources, Inc.
Address: 2711 N. Haskell Ave. Ste 2800 LB 22
City/State/Zip: Dallas, TX 75204
Purchaser: _____
Operator Contact Person: Steve Von Feldt
Phone: (214) 756-6679
Contractor: Name: Excell Drilling Co.
License: 8273
Wellsite Geologist: Steve Von Feldt

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: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

05-06-02 05-07-02 06-07-2002
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

CONSERVATION DIVISION
WICHITA, KS
API No. 15 - 181-20316

County: Sherman 39 (drl)
N W S W Sec. 4 Twp. 7 S. R. 38 East West
2021 feet from (S) N (circle one) Line of Section
779 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Stasser Well #: 1-4

Field Name: Goodland

Producing Formation: Niobrara

Elevation: Ground: 3527 Kelly Bushing: _____

Total Depth: 1236' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 350 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 5000 ppm Fluid volume 220 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

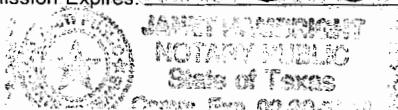
County: _____ Docket No.: _____

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: Steven Von Feldt
Title: Senior Geologist Date: 9/24/02
Subscribed and sworn to before me this 24th day of September

2002
Notary Public: Veron Obermair
Date Commission Expires: 2-20-2003



KCC Office Use ONLY	
<input checked="" type="checkbox"/> <u>Deny</u> Letter of Confidentiality Attached <u>Deny</u> <input type="checkbox"/> If Denied, Yes <input checked="" type="checkbox"/> Date: <u>09-26-02</u> <u>Deny</u>	
<input type="checkbox"/> Wireline Log Received <input type="checkbox"/> Geologist Report Received <input type="checkbox"/> UIC Distribution	

Operator Name: Rosewood Resources, Inc. Lease Name: Stasser Well #: 1-4
 Sec. 4 Twp. 7 S. R. 38 East West County: Sherman

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes	<input checked="" type="radio"/> No	Log	Formation (Top), Depth and Datum	Sample	
Samples Sent to Geological Survey	<input type="checkbox"/> Yes	<input checked="" type="radio"/> No	Name	Top	Datum	
Cores Taken	Yes	<input checked="" type="radio"/> No	<i>Beecher Island</i> 1032 +2556			
Electric Log Run (Submit Copy)	<input checked="" type="radio"/> Yes	No	RECEIVED KANSAS CORPORATION COMMISSION			
List All E. Logs Run:						SEP 25 2002
Triple Combo, DSI						CONSERVATION DIVISION WICHITA, KS

CASING RECORD							
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	9 7/8"	7"	20	350	Neat	150	3%cc1/4# Flocel
Production	6 1/4 "	4 1/2"	10.5	1211	50/50 Poz.	60	10% salt

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: ____ Perforate ____ Protect Casing ____ Plug Back TD ____ Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

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
2	1192'-1194'/Set 4 1/2" CIBP @ 1175'	Dump bailed 20' cement on top of CIBP	
2	1031'-1056'	Frac w/ 44646 gal & 74,740# 20/40 sd +	
		25,000# 12/20 sd + 20 tons CO2	

TUBING RECORD	Size	Set At	Packer At	Liner Run	Yes	No
N/A						

Date of First, Resumed Production, SWD or Enhr. <i>SI</i>	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	METHOD OF COMPLETION	Production Interval
<input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Sumit ACO-18.)	Open Hole <input checked="" type="radio"/> Perf. <input type="checkbox"/> Other (Specify)	Dually Comp. <input type="checkbox"/> Commingled _____