

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30420
Vincent Innone dba
Name: VJI NATURAL RESOURCES, INC.
Address: 30-38 48TH STREET
City/State/Zip: ASTORIA NY 11103
Purchaser: _____
Operator Contact Person: JASON DINGES
Phone: (785) 625-8360
Contractor: Name: ANDY ANDERSON dba
A & A PRODUCTION
License: 30076
Wellsite Geologist: JERRY GREEN

Designate Type of Completion:
____ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SIOW ____ 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. _____

5-29-03 6-6-03 6-6-03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-22914-00-00
County: GRAHAM
SW - NE-SE Sec. 25 Twp. 8 S. R. 25 East West
1600 feet from S / N (circle one) Line of Section
990 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: HOLLEY Well #: 1-B

Field Name: HOLLEY

Producing Formation: LKC

Elevation: Ground: 2404 Kelly Bushing: 2409

Total Depth: 3980 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 212' @ 217' Feet

Multiple Stage Cementing 150 SACKS 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 3000 ppm Fluid volume 140 bbls

Dewatering method used Natural Settling

Location of fluid disposal if hauled offsite:

Operator Name: Challenger Exploration

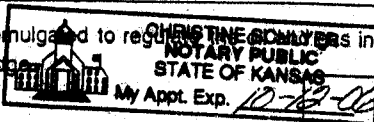
Lease Name: Dechant License No.: 03919

Quarter _____ Sec. 17 Twp. 14 S. R. 18 East West

County: Ellis Docket No.: 24904

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: [Signature]

Title: agent Date: 6-16-03

Subscribed and sworn to before me this 16 day of June

192003

Notary Public: Christine Schuyler

Date Commission Expires: 10-12-06

KCC Office Use ONLY

- ____ Letter of Confidentiality Attached
- ____ If Denied, Yes Date: _____
- ____ Wireline Log Received
- ____ Geologist Report Received
- ____ UIC Distribution

Vincennt Innone dba

Operator Name: VJI NATURAL RESOURCES, INC. Lease Name: HOLLEY Well #: 1-B

Sec. 25 Twp. 8 S. R. 25 East West County: GRAHAM

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.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run: <u>Radiation Guard Log</u></p>	<p><input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhy</td> <td>2129-60</td> <td>249</td> </tr> <tr> <td>Heebner</td> <td>3695</td> <td>-1286</td> </tr> <tr> <td>Toronto</td> <td>3723</td> <td>-1314</td> </tr> <tr> <td>LKC</td> <td>3736</td> <td>-1327</td> </tr> <tr> <td>BKC</td> <td>3958</td> <td>-1549</td> </tr> <tr> <td>RTD</td> <td>3979</td> <td>-1570</td> </tr> </tbody> </table>	Name	Top	Datum	Anhy	2129-60	249	Heebner	3695	-1286	Toronto	3723	-1314	LKC	3736	-1327	BKC	3958	-1549	RTD	3979	-1570
Name	Top	Datum																				
Anhy	2129-60	249																				
Heebner	3695	-1286																				
Toronto	3723	-1314																				
LKC	3736	-1327																				
BKC	3958	-1549																				
RTD	3979	-1570																				

CASING RECORD <input 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	25	217	60/40 POZ	150	3% CC 2% GEL

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 <i>(Amount and Kind of Material Used)</i>	Depth

Lining Record	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		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 Mcl	Water Bbls.	Gas-Oil Ratio Gravity

Position of Gas	METHOD OF COMPLETION
Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <input type="checkbox"/> <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____