

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED

DEC 05 2005

KCC WICHITA

Form ACO  
September 1999  
Form Must Be Typed

Operator: License # 33019  
Name: Rosewood Resources, Inc.  
Address: 2711 N. Haskell Ave., Suite 2800, LB 22  
City/State/Zip: Dallas, TX 75201  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Tom Roelfs  
Phone: ( 785 ) 332-0374  
Contractor: Name: Coil Tubing Solutions  
License: 33532  
Wellsite Geologist: Steven VonFeldt  
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. \_\_\_\_\_  
6/3/2004 6/4/2004 7/23/2004  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 181-20345-00  
County: Sherman  
SE NW SE SW Sec. 27 Twp. 8 S. R. 40 ☐ East ☒ West  
675 feet from (S) N (circle one) Line of Section  
1746 feet from E (W) (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Topliff Well #: 1-27  
Field Name: Goodland  
Producing Formation: Niobrara  
Elevation: Ground: 3721 Kelly Bushing: 3727  
Total Depth: 1310' Plug Back Total Depth: 1306'  
Amount of Surface Pipe Set and Cemented at 352' csg @ 358 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 200 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: Kathy Roelfs  
Title: Production Assn Date: 11-18-05  
Subscribed and sworn to before me this 18th day of November  
05  
Notary Public: Janet Spensen  
Date Commission Expires: August 24, 2008

KCC Office Use ONLY

NO Letter of Confidentiality Received

If Denied, Yes ☐ Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

Side Two

Operator Name: Rosewood Resources, Inc. Lease Name: Topliff Well #: 1-27  
 Sec. 27 Twp. 8 S. R. 40 ☐ 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 ☐ Yes ☒ No  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No  
 (Submit Copy)

List All E. Logs Run:

Platform Express Resistivity, Porosity, Density ML-GR

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name Top Datum

Niobrara 1092' KB

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CASING RECORD ☒ New ☐ 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	9 7/8"	7"	20#	358	Neat	150	3% CC
Production	6 1/4"	4 1/2"	1.5#	1306	Neat	60	10% Salt & 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 (Amount and Kind of Material Used)	Depth
2	1092' to 1124'	Frac w/48,061 gals MavFoam 70q & 100,000# 16/30	
		Brady sd & 240,000 scf N2	

TUBING RECORD	Size	Set At	Packer At	Liner Run
none				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr. 1/25/2005		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. none	Gas Mcf 28	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval

☐ Vented ☒ Sold ☐ Used on Lease (If vented, Submit ACO-18.) ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled ☐ Other (Specify) \_\_\_\_\_