

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

Form ACO-1  
 September 1999  
 Form Must Be Typed

**ORIGINAL**

Operator: License # 6157  
 Name: J & J Oil Company  
 Address: 15518E 85TH Road  
 City/State/Zip: Mound City Kansas 66056  
 Purchaser: Plains Marketing L.P.  
 Operator Contact Person: Paul Jackson  
 Phone: (913) 795 2586  
 Contractor: Name: J & J Oil Co.  
 License: 6157  
 Wellsite Geologist: No

**RECEIVED**

**NOV 25 2003**

**KCC WICHITA**

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. E-12,025

<u>8-5-03</u>	<u>8-7-03</u>	<u>11-18-03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 1 07-23752.00.00

County: Linn

N/2 N/E - NW Sec. 11 Twp. 20 S. R. 23  East  West

5010 feet from (S) / N (circle one) Line of Section

3356 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE ~~SE~~ **NW** SW

Lease Name: Person Well #: C-3

Field Name: Lacygne Cadmus

Producing Formation: Peru

Elevation: Ground: 837 Kelly Bushing: \_\_\_\_\_

Total Depth: 212 Plug Back Total Depth: No

Amount of Surface Pipe Set and Cemented at 21' Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from 0 191

feet depth to -21' 0 w/ -6 23 sx cmt.

**Drilling Fluid Management Plan** ME 11-10-4-03  
 (Data must be collected from the Reserve Pit)

Chloride content None ppm Fluid volume 60 bbls

Dewatering method used Pump into truck

Location of fluid disposal if hauled offsite:

Operator Name: J & J Oil Co.

Lease Name: Person License No.: 6157

Quarter N/W Sec. 11 Twp. 20 S. R. 23  East  West

County: Linn Docket No.: E-12, -025

**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: Paul Jackson

Title: Partner Date: 11-19-03

Subscribed and sworn to before me this 19 day of November, 19 03.

Notary Public: Carmen L. Self

Date Commission Expires: 9-17-07

NOTARY PUBLIC - State of Kansas  
 CARMEN L. SELF  
 My Appt. Expires 9-17-07

**KCC Office Use ONLY**

N Letter of Confidentiality Attached  
 If Denied, Yes  Date: \_\_\_\_\_

N Wireline Log Received

N Geologist Report Received

✓ UIC Distribution

Operator Name: J & J Oil Co. Lease Name: Person Well #: C-3  
 Sec. 11 Twp. 20 S. R. 23  East  West County: Linn

**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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><input checked="" type="checkbox"/> Log</td> <td style="width:30%;">Formation (Top), Depth and Datum</td> <td style="width:20%;"><input checked="" type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Wayside</td> <td>119</td> <td>124</td> </tr> <tr> <td>Peru</td> <td>181</td> <td>188</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample	Name	Top	Datum	Wayside	119	124	Peru	181	188
<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample											
Name	Top	Datum											
Wayside	119	124											
Peru	181	188											

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	# Sacs Used	Type and Percent Additives
Surface	8 3/4"	6 1/4"	12	21'	2	6	None
Caseing	5 1/8"	2 3/8"	4	191'	2	23	None

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		Acid, Fracture, Shot, Cement Squeeze Record		
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		
				Depth	
2	Perf 119 to 124		5 sack sand		124
2	Perf 181 to 188		6 sacks sand		188

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Specify)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	Production Interval
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API # 15-107-23752-00-00  
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ORIGINAL

PERSON Well # C-3

NOV 25 2003

KCC WICHITA

3	-	3	Top Soil
4	-	7	Clay & Gravel
5	-	12	Clay
69	-	81	Shale
1	-	82	Black shale
17	-	99	Shale
8	-	107	Red Bed
1	-	108	Black Shale
5	-	111	Light shale
2	-	113	Red Bed
6	-	119	Light Shale
3	-	122	Oil sand Good bleed some water
1	-	123	Lime
1	-	124	Oil sand
6	-	130	Oil sand shale sts
4	-	134	shale with sand str
8	=	142	sandy shale
6	-	148	Shale & lime
10	-	164	Lime
11	-	175	Shale
6	-	181 $\frac{1}{2}$	Shale& oil sand str
7	-	188 $\frac{1}{2}$	Oil sand Good bleed
2 $\frac{1}{2}$	-	191	Oil sand Good bleed & water
11	-	202	Shale
3	-	205	Coal
4	-	209	Light shale
T.D.		212	Lime

Person C-3

119 - 10:58

- 1. - 120 - 10:52 - 2
- 2. - 121 - 10:56 - 4
- 3. - 122 - 11:04 - 8
- 4. - 123 - 11:08 - 4
- 5. - 124 - 11:13 - 5
- 6. - 125 - 11:16 - 3
- 7. - 126 - 11:20 - 4
- 8. - 127 - 11:24 - 4
- 9. - 128 -
- 10. - 129 -
- 11. - 130 -

119-122 Oil sand Good Perf  
Little water in Bottom 1'

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Lime

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Oil sand Accy Bleed 123-124

Oil sand shale Lam. (50-50)

Person C-3

- 1. - 175 - 2:01
- 2. - 176 - 2:02 - 1
- 3. - 177 - 2:05 - 3
- 4. - 178 - 2:09:30 - 4 1/2
- 5. - 179 - 2:12 - 2 1/2
- 6. - 180 - 2:13 - 1
- 7. - 181 - 2:16:30 - 3 1/2
- 8. - 182 - 2:18:30 - 2
- 9. - 183 - 2:20 - 1 1/2
- 10. - 184 - 2:22 - 2
- 11. - 185 - 2:23 - 1
- 12. - 186 - 2:24:30 - 1 1/2
- 13. - 187 - 2:26 - 1 1/2
- 14. - 188 - 2:27 - 1
- 15. - 189 - 2:28:30 - 1 1/2
- 16. - 190 - 2:30 - 1 1/2
- 17. - 191 - 2:32 - 2
- 18. - 192 - 2:36 - 4

Shale + Oil sand str.

Oil sand Good Bleed

181.50 - 188.50

188.50 - 191 Oil sand Good Bleed (water)

Part

KANSAS CORPORATION COMMISSION

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# Big Sugar Lumber



Everything To Build Your Home

∞ ∞ TWO LOCATIONS ∞ ∞

## ORIGINAL

### Do it center

1005 CLARK STREET  
FORT SCOTT, KANSAS 66701  
(620) 223-5279  
FAX (620) 223-1506

411 MAIN STREET  
MOUND CITY, KANSAS 66056  
(913) 795-2210  
FAX (913) 795-2194

BIG SUGAR LUMBER-MOUND CITY  
WORKING HARD TO SERVE YOU BETTER!

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCES	TERMS	CLERK	DATE	TIME
x9		API # 15-107-23752-00-00		NET	NA	7/26/03	10:30

SOLD TO

SHIP TO

\*\*\*\* CASH \*\*\*\*

~~XXXXXXXXXX~~  
JANU  
OIL

DOCH 181954

\*\*\*\*\*

\* INVOICE \*

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SLSPR: 91 MIKE AVERY  
TAX : 031 KANSAS STATE TAX

QUANTITY		U/M	ITEM NUMBER	DESCRIPTION	SUGG	NUMBER OF UNITS	BIG SUGAR PRICE	EXTENSION
SHIPPED	ORDERED							
	240	BG	CPPC	PORTLAND CEMENT	6.99	240	6.29 /BG	1,509.60
				Take 210 BAGS MONDAY A.M.			Check 4/352	
				66040 ZIP CODE				

CREDIT DISCLOSURE: ACCOUNTS NOT PAID IN FULL IN 30 DAYS AFTER BILLING DATE ABOVE ARE SUBJECT TO SERVICE CHARGE COMPUTED BEFORE DEDUCTING CURRENT PAYMENTS AND/OR CREDITS APPEARING ON MONTHLY STATEMENT. KANSAS LIEN RIGHT LAWS APPLY ON MATERIAL PURCHASED FOR YOUR HOME. SERVICE CHARGE IS 1.5% PER MONTH (ALL RETURNS MUST BE ACCOMPANIED BY TICKET.) 20% RESTOCKING CHARGE ON NON-STOCK RETURN ITEMS.

\*\* PAYMENT RECEIVED \*\*

\*\* PAID IN FULL \*\*

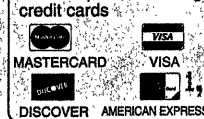
1,604.70

TAXABLE 1509.60

NON-TAXABLE 0.00

SUBTOTAL 1509.60

We accept the following credit cards



CHECK PAYMENT

CK# 4351 ABAH

1,604.70

TAX AMOUNT 95.10

TOTAL AMOUNT 1604.70

X

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KCC WICHITA