

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 # 3194
Name: TRI-UNITED, INC **RECEIVED**
Address: 950 270TH AVE
City/State/Zip: HAYS KS 67601 **JAN 12 2004**
Purchaser: Link Energy KCC WICHITA
Operator Contact Person: EUGENE LEIKER
Phone: (785) 628-3670
Contractor: Name: Andy Anderson dba A & A PRODUCTION
License: 30076
Wellsite Geologist: Eugene Leiker
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. _____
9-10-03 9-17-03 10-7-03
Spud Date or Date Reached TD Completion Date or Recompletion Date

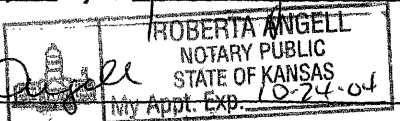
API No. 15 - 051-25254-00-00
County: ELLIS
E2 - NE, NW, SE Sec. 30 Twp. 13 S. R. 20 East West
2970 feet from S (N) (circle one) Line of Section
1500 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) (SE) NW SW
Lease Name: SCHUSTER Well #: A-2
Field Name: KAISER
Producing Formation: Arbuckle
Elevation: Ground: 2326 Kelly Bushing: 2331
Total Depth: 3992 Plug Back Total Depth: 3990
Amount of Surface Pipe Set and Cemented at 208' @ 213' Feet
Multiple Stage Cementing Collar Used? 150 SACKS Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1640'
feet depth to Surface w/ 265 sx cmt.
60/40 8% gel 3% cc $\frac{1}{4}$ FL

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 52,000 ppm Fluid volume 400 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: NA
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: Eugene E. Leiker
Title: President Date: 1-9-04
Subscribed and sworn to before me this 9th day of January 2004.
19 _____
Notary Public: Roberta Angell
Date Commission Expires: 10-24-04



KCC Office Use ONLY

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

✓

X

Operator Name: TRI-UNITED, INC Lease Name: SCHUSTER Well #: A-2
 Sec. 30 Twp. 13 S. R. 20 East West County: ELLIS

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:

Radiation Guard Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
ANHY	1651'	KB
HEEB	3588'	+680
Lans	3624'	-1257'
ARB	3980'	-1293'
		-1649'

RECEIVED
 JAN 12 2004
 KCC WICHITA

CASING RECORD New Used

Report all strings cat-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	20#	213	COMMON	150	3% CC 2% GEL
Long String	7 7/8	4 1/2	10.5#	3990'	asc 2%gel	175	2 %gel

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2 per ft	3983-3987	4' Gun Jet Perforation.	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	3985'	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr. 10-10-03 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	42	NA	None		42

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

ALLIED CEMENTING CO., INC.

Federal Tax I.D.# [REDACTED]

ORIGINAL
SERVICE POINT:

15753

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

Russell

DATE <u>9/10/03</u>	SEC. <u>30</u>	TWP. <u>13</u>	RANGE <u>20</u>	CALLED OUT <u>5:00pm</u>	ON LOCATION <u>9:00pm</u>	JOB START	JOB FINISH <u>11:30AM</u>
LEASE <u>Schuster</u>	WELL # <u>A-2</u>	LOCATION <u>Ellis 35 1/2 W</u>			COUNTY <u>Ellis</u>	STATE <u>Kan</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR A & A Drilling

TYPE OF JOB SURFACE

HOLE SIZE 12 1/8 T.D. 218

CASING SIZE 8 1/2 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT 13 bbls

OWNER

CEMENT AMOUNT ORDERED 150 lbs Com 3-2

COMMON	<u>150</u>	@	<u>7.15</u>	<u>1072.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>10.00</u>	<u>30.00</u>
CHLORIDE	<u>5</u>	@	<u>30.00</u>	<u>150.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>150</u>	@	<u>4.45</u>	<u>172.50</u>
MILEAGE	<u>54/SK</u>	/MILE		<u>300.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Bill

345 HELPER Dave

BULK TRUCK DRIVER Rufus

282

BULK TRUCK DRIVER

RECEIVED

JAN 12 2004

TOTAL 1725.00

KCC WICHITA SERVICE

REMARKS:

Ran 6 hrs of 8 1/2 net C 217'

Cemt of 150 lb Cemt ✓

pump plug w/ 13 bbls of water

Cemt did cir.

DEPTH OF JOB

PUMP TRUCK CHARGE 520.00

EXTRA FOOTAGE @

MILEAGE 40 @ 3.50 140.00

PLUG 1-8 1/2 wood @ 45.00

TOTAL 705.00

CHARGE TO: TR United

STREET

CITY STATE ZIP

FLOAT EQUIPMENT

@

@

@

@

@

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TOTAL

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

SIGNATURE

Dave J
PRINTED NAME

ALLIED CEMENTING CO., INC. 14210

Federal Tax I.D.# [REDACTED]

ORIGINAL
SERVICE POINT:

Oakley

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

DATE <u>9-17-03</u>	SEC. <u>30</u>	TWP. <u>13³</u>	RANGE <u>20²</u>	CALLED OUT	ON LOCATION <u>2:00 AM</u>	JOB START <u>8:00 AM</u>	JOB FINISH <u>8:45 AM</u>
LEASE <u>Schuster</u>	WELL # <u>A-2</u>	LOCATION <u>ELLIS 1W-45-1/4W</u>	COUNTY <u>ELLIS</u>	STATE <u>Kan</u>			
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <u>A+A Digs Co.</u>	OWNER <u>Same</u>
TYPE OF JOB <u>Production</u>	
HOLE SIZE <u>7 7/8"</u>	T.D. <u>3992'</u>
CASING SIZE <u>4 1/2"</u>	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT <u>10'</u>
CEMENT LEFT IN CSG. <u>10'</u>	
PERFS.	
DISPLACEMENT <u>64 1/2</u>	

CEMENT			
AMOUNT ORDERED <u>175 SKS ASC, 2% Gel</u>			
<u>500 gal WFR-2</u>			
COMMON	@		
POZMIX	@		
GEL <u>3 SKS</u>	@	<u>10.00</u>	<u>30.00</u>
CHLORIDE	@		
<u>ASC 175 - SKS</u>	@	<u>9.00</u>	<u>1,575.00</u>
<u>WFR-2 500 Gal</u>	@	<u>1.00</u>	<u>500.00</u>
	@		
	@		
HANDLING <u>175 - SKS</u>	@	<u>1.15</u>	<u>201.25</u>
MILEAGE <u>50 per SK/mile</u>			<u>350.00</u>

EQUIPMENT	
PUMP TRUCK # <u>373</u>	CEMENTER <u>Walt</u>
	HELPER <u>Andrew</u>
BULK TRUCK # <u>218</u>	DRIVER <u>Jarrod</u>
BULK TRUCK #	DRIVER

RECEIVED TOTAL 2,656.25

JAN 12 2004

KCC WICHITA SERVICE

REMARKS:

Put 15 SKS in Ruff
Pump 500 gal WFR-2
Mix 160 SKS ASC, release Plug, clear
Pump lines, Displace 64 1/2 BBL @ 200#
Loaded 2' 1000#, Float held
J.H.C.

DEPTH OF JOB		
PUMP TRUCK CHARGE		<u>1,130.00</u>
EXTRA FOOTAGE	@	
MILEAGE <u>40 - miles</u>	@	<u>3.50</u> <u>140.00</u>
PLUG <u>4 1/2 Rubber</u>	@	<u>48.00</u>
	@	
	@	
TOTAL		<u>1,318.00</u>

CHARGE TO: Tri-United, Inc
STREET _____
CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>4 1/2</u>		
<u>1 Guide - Shaq</u>	@	<u>125.00</u>
<u>1-AFU insert</u>	@	<u>210.00</u>
<u>6 - Centralizers</u>	@	<u>45.00</u> <u>270.00</u>
<u>1 - Basket</u>	@	<u>116.00</u>
	@	

TOTAL 721.00

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
TOTAL CHARGE _____
DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Eugene E Leiker

Eugene Leiker
PRINTED NAME

ALLIED CEMENTING CO., INC. 14532

Federal Tax I.D.# [REDACTED]

ORIGINAL SERVICE POINT: R

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

DATE <u>10/1/03</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>1:00pm</u>	JOB START	JOB FINISH <u>2:30pm</u>
LEASE <u>Schuster</u>	WELL # <u>A-2</u>	LOCATION <u>Ellis 1w 33</u>			COUNTY <u>Ellis</u>	STATE <u>Ks</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR Co. Tools

TYPE OF JOB Top Stage

HOLE SIZE _____ T.D. _____

CASING SIZE 4 1/2" DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. 11040

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED 250 60/40 890 Grl
50 Com 370cc

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____

EQUIPMENT

PUMP TRUCK CEMENTER Paul

360 HELPER Shane

BULK TRUCK

360 DRIVER Scott

BULK TRUCK

213 DRIVER Gary

RECEIVED _____ TOTAL _____

JAN 12 2004 SERVICE
KCC WICHITA

REMARKS:
Tied to 4 1/2 csg. Broke
Circulation. Mixed 240psi
10/1/03 890 1/4" flt. Followed by
25 com 370cc. Displaced 25 bbl
@ 1000 psi. Shut in.
Cement Circulated!

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG 4 1/2 _____ @ _____

_____ @ _____

_____ @ _____

CHARGE TO: Tri-United

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Eugene E. Leiker

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Eugene E. Leiker

PRINTED NAME