

Operator Name: BLACK DIAMOND OIL, INC. Lease Name: VanDiest Well #: 1
 Sec. 33 Twp. 4 S. R. 22W East West County: Norton

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: Dual Induction, Cement Bond
(Surface), Sonic & Micro

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	1912	+369
Topeka	3226	-945
Heebner	3423	-1142
Lansing KC	3468	-1187
BKC	3650	-1369
Arbuckle	3721	-1440

CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacjs Used	Type and Percent Additives
Surface Pipe	12 1/4	8 5/8"	20	219.50	Common	150	2%Gel&3%CC
Production St.	7 7/8	5 1/2"	14	3724	Common	175	
			Port Collar @ 1872'		Common	400	

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
4	3721-23	250 MCA	
	Bridge Plug		3680
1	3598-3600	} 1500 gals MCA	
1	3610-3612		
1	3630-32		

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8	3665		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
			<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	15	0	80		

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

RECEIVED
 DEC 29 2003
 KCC WICHITA

ALLIED CEMENTING CO., INC.

15790

Federal Tax I.D.# [REDACTED]

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

ORIGINAL SERVICE POINT: R

DATE <u>8/31/03</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>12:00 A.M.</u>	JOB START	JOB FINISH <u>1:30 P.M.</u>
LEASE <u>land rest</u>	WELL# <u>1</u>	LOCATION <u>Edmond 15 2 2 N</u>			COUNTY <u>Norton</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR D. discovery

TYPE OF JOB Logging

HOLE SIZE 7 7/8 T.D. 3225

CASING SIZE 5 1/2 DEPTH 3,724

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL Port Collar DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT 40.46

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 90 1351

OWNER _____

CEMENT AMOUNT ORDERED 200 cement
(200 Cu) WFA-2

COMMON @ _____

POZMIX @ _____

GEL @ _____

CHLORIDE @ _____

HANDLING @ _____

MILEAGE @ _____

TOTAL _____

EQUIPMENT

PUMP TRUCK CEMENTER Paul

306 HELPER Shane

BULK TRUCK

222 DRIVER Don

BULK TRUCK

DRIVER

RECEIVED
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KCC WICHITA

REMARKS:

Cent on # 258,410 - Basket # 3,47

Port Collar # 47 (a)

40 Gallons of Portland Cement 175 cu

Plug Lower Float 1160

15x Rathole - 7 feet deep

10x Mousehole

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE @ _____

MILEAGE @ _____

PLUG 5/2 TRP @ _____

TOTAL _____

CHARGE TO: Black Diamond

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

5/2

Basket 1 @ _____

Guide shoe @ _____

AFU Insert @ _____

Port Collar @ _____

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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Thomas Al

Thomas Al
PRINTED NAME