

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

ORIGINAL

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: Steven vonFeldt
Phone: (214) 756-6679
Contractor: Name: Excell Drilling Company
License: 8273
Wellsite Geologist: Steven vonFeldt

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 _____
_____ Plug Back _____ Plug Back Total Depth _____
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Enhr.?) _____ Docket No. _____

<u>9/27/2003</u>	<u>9/28/2003</u>	<u>10/23/2003</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 181-20335-10-10
County: Sherman
E2 E2 SW Sec. 10 Twp. 7 S. R. 39 East West
2050 feet from S N (circle one) Line of Section
2294 feet from E W (circle one) Line of Section


Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: PANCAKE Well #: 1-10
Field Name: Goodland
Producing Formation: Niobrara
Elevation: Ground: 3549' Kelly Bushing: 3543'
Total Depth: 1217' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at _____ 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 *All 1 w/ 3.27.04*
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 220 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: Steven vonFeldt
Title: Geologist Date: 2/04/05
Subscribed and sworn to before me this 5th day of February,
2004
Notary Public: Janet Hambright
Date Commission Expires: 2-20-07

 **JANET HAMBRIGHT**
Notary Public, State of Texas
My Commission Expires
February 20, 2007

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

Operator Name: ROSEWOOD RESOURCES, INC. Lease Name: PANCAKE Well #: 1-10
 Sec. 10 Twp. 7 S. R. 39 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Triple Combo, CBL/GR/CCL	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:20%;">Log Name</th> <th style="width:50%;">Formation (Top), Depth and Datum</th> <th style="width:30%;">Sample Datum</th> </tr> <tr> <td>NIOBRARA</td> <td>982'</td> <td></td> </tr> </table>	Log Name	Formation (Top), Depth and Datum	Sample Datum	NIOBRARA	982'	
Log Name	Formation (Top), Depth and Datum	Sample Datum					
NIOBRARA	982'						

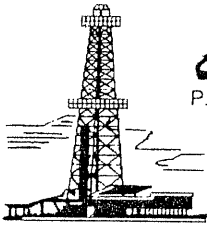
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	9-7/8"	7"	17#	342'	Neat	145	3% cc, flowseal
Production		4-1/2"	10.5#	1214'	50/50 Poz	60	10% salt, gilsoni

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 <i>(Amount and Kind of Material Used)</i>	Depth
2	982'-1012'	Frac w/48,145 gals MavFoam 70 & 100,000# 16/30 Brady sd & 148,000 scf N2	

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	<input checked="" type="checkbox"/> No
NONE							
Date of First, Resumed Production, SWD or Enhr. 2/3/2004			Producing Method				
			<input checked="" type="checkbox"/> Flowing	Pumping	Gas Lift	Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	NONE	35	NONE				

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



CEMENTER'S WELL SERVICE, INC.

P.O. BOX 336220 • GREELEY, CO 80633 • (970) 353-7299 • FAX (970) 353-7712

OUR INVOICE

183486

ORIGINAL

Rosewood

Date <u>09-28-03</u>	Well Owner <u>Resources Inc</u>	Well No. <u>1-10'</u>	Lease <u>Pancake</u>
County <u>Shepman</u>	State <u>Kansas</u>	Field	
Charge to <u>Rosewood Resources Inc</u>	Charge Code		
Address <u>P.O. Box 727</u>	For Office Use Only		
City, State <u>Yuma, Colorado, 80759</u>			
Pump Truck No. <u>1204</u>	Code	Bulk Truck No. <u>1211</u>	Code
Type of Job	Depth	Ft. <u>1217'</u>	To
Surface	Bottom of Surface	Ft.	To
Plug	Plug Landed @ <u>1214'</u> Ft.	Time On <u>19:15</u>	
Production <u>4 1/2" Coring 10.5#</u>	Pipe Landed @ <u>1215'</u> Ft.	Time Off <u>plug Down @ 20:15</u>	

Reference No.	Description	Qty.	Meas.	Unit Price	Amount
	Pump Truck Charge				
	Cement Neat				
	Poz. Mix ✓ <u>50/50</u>	<u>60</u>	<u>SKS</u>		<u>4500.00</u>
	Calcium Chloride <u>10% SALT</u>				
	Gel <u>2%</u> Flo-Cele #Per Sack				
	Handling Charge <u>1/4 #/sk Gilsonite</u>				
	Hauling Charge				
	Additional Cement				
	<u>4 1/2" Centralizers</u>	<u>6</u>			
	<u>" Scaotchess</u>	<u>7</u>			
	<u>" A.F.L. shoe</u>	<u>1</u>			
	<u>" Catch Down plug bottle</u>	<u>1</u>			
	Mixing Rate <u>4 BPM</u> - Displacement Rate <u>6 BPM</u> Slurry Vol. <u>1.28 CU FT/sk</u> - Slurry WT <u>14.2 PPG</u>				

RECEIVED
KANSAS CORPORATION COM

FEB 09 2004

CONSERVATION DIVISION
WICHITA, KS

Remarks <u>Flush w/10 BBLs Milk Flush</u>	Tax Reference Code	Sub Total	<u>4500.00</u>
<u>Displace w/19.3 BBLs K-CL</u>	State <u>4.9%</u>	Tax	<u>220.50</u>
<u>Landed plug w/2000 PST</u>	Disc.	Total	<u>4720.50</u>

Truck No.	Code	State Mileage	Nebraska	Colorado	Wyoming	Other	Total Mileage
<u>1204</u>	Pump Truck		<u>16</u>	<u>20</u>		<u>60</u>	
<u>1211</u>	Bulk Truck		<u>16</u>	<u>20</u>		<u>60</u>	

We do not assume any responsibility for any damage or conditions resulting from our services. All pricing is subject to review and revision.

Delivered By Leon, John, Randy

Received By Tom W. [Signature]
Customer or His Agent