

ORIGINAL

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

RECEIVED

APR 15 2004

KCC WICHITA

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 32902
Name: Hopewell Operating, Inc.
Address: 4600 Greenville Ave., Ste. 200
City/State/Zip: Dallas, TX 75206
Purchaser: Plains Marketing, LP
Operator Contact Person: Carol M. Shiels
Phone: (214) 691-6216
Contractor: Name: McPherson Drilling
License: 5675
Wellsite Geologist: Mike Ebers

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. _____

5/02/2003 5/05/2003 8/26/2003
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 001-29001 - 0000
County: Allen
NE NE NW _____ Sec. 27 Twp. 25 S. R. 18 East West
4950 feet from S / N (circle one) Line of Section
2970 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Weeks Well #: 1
Field Name: Humboldt-Chanute

Producing Formation: _____
Elevation: Ground: 980 Kelly Bushing: _____
Total Depth: 1066 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from surface
feet depth to 20' w/ 10 sx cmt.

Drilling Fluid Management Plan Allen 4.19.04
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
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: Marie Dewsb
Title: Geological Asst. Date: 4/13/04
Subscribed and sworn to before me this 13th day of April,
2004.

Notary Public: Jamie J. Adkins
MY COMMISSION EXPIRES August 7, 2007
Date: _____

KCC Office Use ONLY
1/6 Letter of Confidentiality Attached
If Denied, Yes Date: _____
1/5 Wireline Log Received
1/6 Geologist Report Received
____ UIC Distribution

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Side Two

Operator Name: Hopewell Operating, Inc. Lease Name: Weeks Well #: 1
Sec. 27 Twp. 25 S. R. 18 East West County: Allen

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 <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	T/Oswego	633	GL
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	T/Bartlesville	816	GL
List All E. Logs Run:		T/Tucker	950	GL
Density-GR		T/Mississippi	1027	GL

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	11"	8 5/8"	20	20	portland	4	
production	7 7/8"	5 1/2"	17#	1064	50/50 poz	195	2% gel 5% salt

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 <i>(Amount and Kind of Material Used)</i>	Depth
4	1017-15, 985-983 & 963-960	F/7300# 20/40	
4	808-805, 793-790, 762-758, 746-742	F/5000# 20/40 & 5500# 12/20	
	5 1/2 bull plug packer @ 720'		
4	671-667, 659-655	F/8000# 20/40 & 4200# 12/20	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8	620'			
Date of First, Resumerd Production, SWD or Enhr. 4/02/04			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	
		5				

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: Other (Specify) _____

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KCC WICHITA



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

ORIGINAL

TICKET NUMBER 20304

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION _____

FIELD TICKET

DATE 5/6/03	CUSTOMER ACCT # 3557	WELL NAME Weeks	QTR/QTR	SECTION 27	TWP 25S	RGE 18E	COUNTY AL	FORMATION MISS
CHARGE TO Hope well operating Inc.			OWNER					
MAILING ADDRESS 5307 E. Mackinac Blvd Ln St 906			OPERATOR					
CITY & STATE Dallas TX 75206			CONTRACTOR					

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
3401	1 well	PUMP CHARGE Cement Pump		525. ⁰⁰
1118	6 SK	Prem Gel 4 In head 2 ahead of Job		70. ⁸⁰
1111	10 SK 500#s	Salt		50. ⁰⁰
1110	20 SK	Gilsonite		388. ⁰⁰
1107	2 SK	Cellofolite		75. ⁵⁰
4405	1	5/8 Rubber Plug		37. ⁵⁰
1123	220 ^{9240 gals} Ball	CITY Water		103. ²⁵
5407	20 Mi-	TON-MILES Cement Delivery		190. ⁰⁰
5501	8.10 hr	WATER TRANSPORTS 2 TRUCKS		600. ⁰⁰
5502	4.8 hr	VACUUM TRUCKS		280. ⁰⁰
1124	195	CEMENT 50/50 Poz		1257. ²⁵
		SALES TAX		144. ⁸⁰
ESTIMATED TOTAL				3723. ³⁰

Revin 2700

CUSTOMER or AGENTS SIGNATURE _____ CIS FOREMAN Dwayne

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

183946

