

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

RECEIVED

MAR 22 2004

KCC WICHITA

Operator: License # 3180

Name: Deutsch Oil Company

Address 8100 E. 22nd St. North

Building 600 Suite D

City/State/Zip Wichita, Kansas 67226

Purchaser:

Operator Contact Person: Kent Deutsch

Phone (316) 681-3567

Contractor Name: Express Well Service Inc.

License: 6426

Wellsite Geologist:

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:

Operator: Geo. Hess

Well Name: #2 McKay

Comp. Date 07-15-49 Old Total Depth 3630

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBSD

Commingled Docket No.

Dual Completion Docket No.

Other (SWD or Inj?) Docket No.

09-23-03 09-24-03 10-24-03

Spud Date Date Reached TD Completion Date

API NO. 15- 009-19047-00-01

County Barton

- NW - SE - NW Sec. 2 Twp. 19 Rge. 15 x W

3630 Feet from S/N (circle one) Line of Section

3630 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE, SE, NW or SW (circle one)

Lease Name Campbell Trust "OWWO" Well # 1-2_OWWO

Field Name Otis/Albert

Producing Formation Chase Group

Elevation: Ground 1981' KB

Total Depth 2571' PBSD

Amount of Surface Pipe Set and Cemented at 966 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 *new on All 1 on 6-17-04*
(Data must be collected from the Reserve Pit)

Chloride content 50000 ppm Fluid volume 60 bbls

Dewatering method used Vac. Truck

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name License No.

Quarter Sec. Twp. S Rng. E/W

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 on 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 *[Signature]*

Title Owner Date 11-25-04

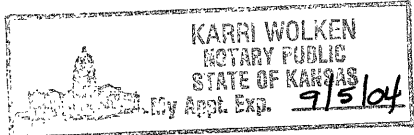
Subscribed and sworn to before me this 25th day of November 2003

Notary Public *[Signature]*

Date Commission Expires Sept. 5, 2004

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)



Operator Name Deutsch Oil Company Lease Name Campbell Trust Well # 1-2 OWWO
 Sec. 2 Twp. 19 Rge. 15 East West
 County Barton

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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:
 Cement Bond Log

Log Sample
Formation (Top), Depth and Datums
 Name Top Datum
 Herington 1848 +133
 Council Grove 2102 -121

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| CASING RECORD <input 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 | 12 1/4" | 8 5/8" | 20# | 966' | | | |
| Production | 7 7/8" | 4 1/2" | 9.5# | 2444' | ASC Lite | 150 125 | 5# Kolseal |

| 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 | 1899-1905 | | 500 gal. 15% MCA. | |
| 2 | 1866-1872 | | 1250 gal. 15% MCA | |
| 2 | 1849-1859 | | 1250 gal. 15% MCA | |

| TUBING RECORD | | Size | Set At | Packer At | Liner Run |
|--|-------------|------------|--|---------------|---|
| | | 2 3/8" | 1862 | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Inj. Waiting on Pipeline | | | Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | | |
| Estimated Production Per 24 Hours | Oil 0 Bbls. | Gas 40 Mcf | Water 0 Bbls. | Gas-Oil Ratio | Gravity |

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)
METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 1849-1905
 Other (Specify) _____

ALLIED CEMENTING CO., INC. 12714 ORIGINAL

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

SERVICE POINT: At Bond

| | | | | | | | |
|-------------------------|-------------------|---|-------|-----------------------------------|----------------------------|---------------------------|---------------------------|
| DATE <u>9-25-03</u> | SEC | TWP | RANGE | CALLED OUT <u>9-24-03 7:30 PM</u> | ON LOCATION <u>7:00 PM</u> | JOB START <u>12:00 AM</u> | JOB FINISH <u>11:5 AM</u> |
| LEASE <u>Campbell</u> | WELL # <u>1-2</u> | LOCATION <u>Heigan 4 W on Alta 1/2 N, E 1/4 Sec</u> | | | COUNTY <u>Barton</u> | STATE <u>Ks</u> | |
| OLD OR NEW (Circle one) | | | | | | | |

CONTRACTOR Exxon Well Service

TYPE OF JOB Production

HOLE SIZE 7 7/8" T.D. 2570'

CASING SIZE 4 1/2" DEPTH 2443'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1000# MINIMUM _____

MEAS. LINE _____ SHOE JOINT 40.34'

CEMENT LEFT IN CSG. 40.34'

PERFS _____

DISPLACEMENT 38 1/4 bbls

OWNER Same

CEMENT

AMOUNT ORDERED 125 lb 65/35 62 lb 1/2" Flashed / lb

150 lb ASC 5# Kolmed / lb

500 gal ASF

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER Tom D

181 HELPER Bob B

BULK TRUCK

259 DRIVER Steve T

BULK TRUCK

_____ DRIVER _____

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TOTAL _____

REMARKS:

Ran 4 1/2" 12 1/2' ca. 30 min circulation

circulated for 30 minutes, pumped

500 gal ASF, mixed 125 lb 65/35 62 lb

1/2" 1/2" Flashed - 150 lb ASC 5# Kolmed,

worked up. Released plug. Displaced

with fresh H₂O. Handed plug at

1000#. Released & float held.

DEPTH OF JOB 2443'

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG 1-4 1/2" rubber @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: Deutch Oil Co.

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1-4 1/2" Guide line @ _____

1-4 1/2" AFU cement @ _____

6-4 1/2" Centralizer @ _____

1-4 1/2" Bump hat @ _____

_____ @ _____

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 [Signature]

PRINTED NAME X KEVIN A. DEUTSCH