

CONFIDENTIAL

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 # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address: 125 N. Market, Suite 1000
City/State/Zip: Wichita, Kansas 67202-1775
Purchaser: Plains Marketing
Operator Contact Person: Dean Pattison, Operations Manager
Phone: (316) 267-4379 ext 107
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Wesley D. Hansen

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

12/13/03 12/29/03 1/27/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-22783 0000
County: Barber
C SE NE SE Sec. 31 Twp. 32 S. R. 12 East West
1650 fsl _____ feet from S / N (circle one) Line of Section
330 fel _____ feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: LONKER Well #: 1
Field Name: Medicine Lodge-Boggs

Producing Formation: Mississippian
Elevation: Ground: 1792 Kelly Bushing: 1801
Total Depth: 5177 Plug Back Total Depth: 4977
Amount of Surface Pipe Set and Cemented at 268 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from n/a
feet depth to _____ w/ _____ sx cmt.

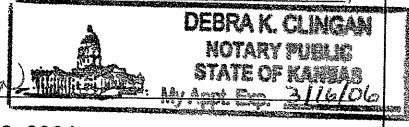
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ 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: _____
Title: Dean Pattison, Operations Manager Date: April 6, 2004

Subscribed and sworn to before me this 6th day of April
20 04
Notary Public: Debra K. Clingan
Date Commission Expires: March 16, 2004



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