

ORIGINAL

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

Operator: License # 5039
Name: A G V Corp.
Address: 123 N Main
City/State/Zip: Attica, Ks 67009
Purchaser: ONE OK
Operator Contact Person: Larry G. Mans
Phone: (620) 254-7222
Contractor: Name: Berentz Drilling Co Inc.
License: 5892
Wellsite Geologist: Tim Pearce

RECEIVED

SEP 02 2004

KCC WICHITA

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. _____

3-25-04 4-09-04 5-13-04
Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 007-22810-00-00

County: Barber
C NW SE Sec. 21 Twp. 32 S. R. 10 East West

1830' feet from N (circle one) Line of Section
1830' feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Werner Well #: 3

Field Name: McGuire Goeman

Producing Formation: Mississippi

Elevation: Ground: 1453 Kelly Bushing: 1458

Total Depth: 4490 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 257 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 IN 9-13-04
(Data must be collected from the Reserve Pit)

Chloride content 5000 ppm Fluid volume 800 bbls

Dewatering method used Fluids hauled from reserve

Location of fluid disposal if hauled offsite: _____

Operator Name: A G V Corp.

Lease Name: Mae Simon License No.: 5039

Quarter NE Sec. 27 Twp. 32 S. R. 10 East West

County: Barber Docket No.: D-21250

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.

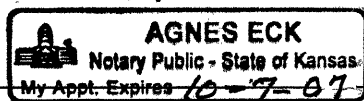
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: Larry G Mans

Title: Secretary Date: 9/1/04

Subscribed and sworn to before me this 1st day of September

2004
Notary Public: Agnes Eck



Date Commission Expires: Oct 7, 2007

KCC Office Use ONLY

No Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: A G V Corp. Lease Name: Werner Well #: 3
 Sec. 21 Twp. 32 S. R. 10 East West County: Barber

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.

dst #1 on geologists report

Drill Stem Tests Taken Yes No Log Formation (Top), Depth and Datum Sample
(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 Log
 Dual Compensated Porosity
 Sonic Cement Bond

Name	Top	Datum
Heebner Shale	3470	-2012
Lansing	3671	-2213
Stark Shale	4117	-2659
Cherokee Shale	4348	-2890
Mississippi	4392	-2934

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	# Sacs Used	Type and Percent Additives
Surface	12 3/4	8 5/8	23	257	60/40Poz	200	2%Ge13%CC
Production	7 7/8	5 1/2	15.5	4569	ClassA/Poz	175/25	

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	4408-4418	1000G 15% MCA	
		1500 G 15%	
4	4396-4404	1000 G 15% MCA	
		40,800 lbs Pro Frac 25	4396 4418

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	4442		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
5-14-2004	<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 Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
	5 BOPD	60 MCFPD	120	12-1	

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____



SALES OFFICE:
 100 S. Main
 Suite #607
 Wichita KS 67202
 (316) 262-3699
 (316) 262-5799 FAX

SALES & SERVICE OFFICE:
 10244 NE Hiway 61
 P.O. Box 8613
 Pratt, KS 67124-8613
 (620) 672-1201
 (620) 672-5383 FAX

SALES & SERVICE OFFICE:
 1700 S. Country Estates Rd.
 P.O. Box 129
 Liberal, KS 67905-0129
 (620) 624-2277
 (620) 624-2280 FAX

Invoice

Bill to:		553500	Invoice	Invoice Date	Order	Order Date
ATTICA GAS VENTURES 123 N. Main Attica, KS 67009			404046	4/15/04	8280	4/9/04
Service Description						
Cement						
✓ 11345						
			Lease		Well	
			Werner		3	
AFE	CustomerRep	Treater	Well Type	Purchase Order	Terms	
	K. Roberts	T. Seba	New Well		Net 30	

PAID Date 4-29-04
 Ck No. 8235

ID.	Description	UOM	Quantity	Unit Price	Price
D205	AA2 (COMMON)	SK	175	\$13.19	\$2,308.25 (T)
D203	60/40 POZ (COMMON)	SK	25	\$7.84	\$196.00 (T)
C221	SALT (Fine)	GAL	908	\$0.25	\$227.00 (T)
C312	GAS BLOCK	LB	124	\$5.00	\$620.00 (T)
C321	GILSONITE	LB	858	\$0.60	\$514.80 (T)
C244	CEMENT FRICTION REDUCER	LB	42	\$4.50	\$189.00 (T)
C195	FLA-322	LB	132	\$7.50	\$990.00 (T)
C300	"A" FLUSH	GAL	5	\$22.50	\$112.50 (T)
F101	TURBOLIZER, 5 1/2"	EA	10	\$71.00	\$710.00 (T)
F211	AUTO FILL FLOAT SHOE, 5 1/2"	EA	1	\$320.00	\$320.00 (T)
F171	LATCH DOWN PLUG & BAFFLE, 5 1/2"	EA	1	\$250.00	\$250.00 (T)
F292	CEMENT SCRATCHERS ROTATING TYPE	EA	40	\$44.00	\$1,760.00 (T)
E100	HEAVY VEHICLE MILEAGE - 1 WAY	MI	45	\$3.25	\$146.25
E101	CAR, PICKUP OR VAN MILEAGE - 1 WAY	MI	35	\$2.00	\$70.00
E104	PROPPANT / BULK DELIV SERVICES/TON MILE, \$200 MIN	TM	421	\$1.30	\$547.30
E107	CEMENT SERVICE CHARGE	SK	200	\$1.50	\$300.00
R210	CASING CEMENT PUMPER, 4501-5000' 1ST 4 HRS ON LOC	EA	1	\$1,827.00	\$1,827.00
R701	CEMENT HEAD RENTAL	EA	1	\$250.00	\$250.00
R702	CASING SWIVEL RENTAL	EA	1	\$125.00	\$125.00
R402	CEMENT PUMPER, ADDITIONAL HRS ON LOCATION	HR	4	\$210.00	\$840.00
C141	CC-1, KCL SUBSTITUTE	GAL	5	\$40.00	\$200.00

Sub Total: \$12,503.10

Discount: \$3,637.54

PLEASE REMIT TO Acid Services, LLC, Dept No 1131, Tulsa, OK 74182

Accounts become past due the last day of the month following billing. Interest rate 1.5% per month (18% per year) on past due accounts.



FIELD ORDER 8280

INVOICE NO.	Subject to Correction		
Date 4-9-04	Lease WELPER	Well # 3	Legal 21-325-10W
Customer ID	County BARBER	State Ks	Station PRATT
A.G.V. Corp	Depth 15.5#/ft	Formation	Shoe Joint 43.28 L.O.
	Casing 5/2	Casing Depth 4560'	TD 4600'
	Customer Representative KENT ROBERTS	Treater T. SEBA	Job Type 5/2 L.S. NEW WELL

CHARGE

AFE Number	PO Number	Materials Received by X Kent Roberts	ACCOUNTING
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Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	CORRECTION	AMOUNT
D-205	175 SKs	AA-2 (common)	✓			
D-203	25 SKs	60/40 Poz	✓			
C-221	908 lbs	SAIT	✓			
C-312	124 lbs	GAS-Blok	✓			
C-321	858 lbs	GILSONITE	✓			
C-244	42 lbs	CMT FRICTION REDUCER	✓			
C-195	132 lbs	FLA-322	✓			
C-300	5 GAL	"A" Plus H	✓			
F-101	10 EA	TURBOLIZER 5/2	✓			
F-211	1 EA	AFU FLOAT SHOE 5/2	✓			
F-171	1 EA	L.O. PLUG & BAPPLE 5/2	✓			
F-292	40 EA	CMT SCRATCHERS ROTAR " "	✓			
E-100	45 MI	HEAVY Veh ME				
E-101	35 MI	P.U MI				
E-104	421 TM	Bulk DELIVERY				
E-107	200 SKs	CMT SERVICE CHARGE				
R-210	1 EA	Pump CHARGE				
R-701	1 EA	CMT HEAD RENTAL				
R-702	1 EA	CSG SWIBL RENTAL				
R-402	4 Hrs	ADD Hrs				
C-141	5 GAL	CC-1	✓			
		DISCOUNTED PRICE =				8,865.56
		+ TAXES				

10244 NE Hiway 61 - P.O. Box 8613 - Pratt, KS 67124-8613 - Phone (620) 672-1201 - Fax (620) 672-5383 TOTAL

ALLIED CEMENTING CO., INC.

P.O. Box 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID: [REDACTED]

 * INVOICE *

Invoice Number: ~~002860~~ 092729

Invoice Date: 03/29/04

Sold AGV Corporation
 To: 123 North Main
 Attica, KS
 67009

Cust I.D.....: AGV
 P.O. Number...: Werner #3
 P.O. Date.....: 04/14/04

Due Date: 04/28/04

Terms: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	120.00	SKS	7.1500	858.00	T
Pozmix	80.00	SKS	3.8000	304.00	T
Gel	4.00	SKS	10.0000	40.00	T
Chloride	7.00	SKS	30.0000	210.00	T
Handling	211.00	SKS	1.1500	242.65	E
Mileage min. chg.	1.00	MILE	125.0000	125.00	E
Surface	1.00	JOB	520.0000	520.00	E
Mileage pmp trk	10.00	MILE	3.5000	35.00	E
Wooden plug	1.00	EACH	45.0000	45.00	T

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 237.96
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2379.65
 Tax.....: 99.08
 Payments: 0.00
 Total....: 2478.73

237.96
 2240.77

*Pd 4/26/04
 ck# 4129*

ALLIED CEMENTING CO., INC. 15098

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

SERVICE POINT:
Medicine Lodge

DATE <u>3-25-04</u>	SEC. <u>22</u>	TWP. <u>32</u>	RANGE <u>10W</u>	CALLED OUT <u>5:00 PM</u>	ON LOCATION <u>6:00 PM</u>	JOB START <u>10:15 PM</u>	JOB FINISH <u>10:35 PM</u>
LEASE <u>Werner</u>		WELL # <u>3</u>		LOCATION <u>Sharon KS, Old Highway</u>		COUNTY <u>Franklin</u>	STATE <u>KS</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>1/2 E, N/S</u>				

CONTRACTOR Prantz Drilling

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 262'

CASING SIZE 8 5/8 x 27' DEPTH 262

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 200 MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

DISPLACEMENT 15 3/4 Bbls

OWNER AGU Corp.

CEMENT AMOUNT ORDERED 200 5'x 60:40:2260L+32cc

COMMON	<u>120</u>	<u>A</u>	@	<u>7.15</u>	<u>858.00</u>
POZMIX	<u>80</u>		@	<u>3.80</u>	<u>304.00</u>
GEL	<u>4</u>		@	<u>10.00</u>	<u>40.00</u>
CHLORIDE	<u>7</u>		@	<u>30.00</u>	<u>210.00</u>
			@		
			@		
			@		
			@		
			@		
HANDLING	<u>211</u>		@	<u>1.15</u>	<u>242.65</u>
MILEAGE	<u>10</u>	<u>x 211 x .05</u>			<u>125.00</u>
				<u>Min chrg</u>	
TOTAL					<u>1779.65</u>

REMARKS:

SERVICE

Run 262' 8 5/8 casing
Break circulation, Pump 5 Bbls
Water, mix 200 cement
Release plug + Displace with
15 3/4 Bbls water, leave 15'
Cement in casing
Circulate cement to surface (105x)

DEPTH OF JOB	<u>262'</u>		
PUMP TRUCK CHARGE			<u>520.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>10</u>	@	<u>3.50</u> <u>35.00</u>
PLUG	<u>Wooden</u>	@	<u>45.00</u> <u>45.00</u>
		@	
		@	

CHARGE TO: AGU Corp.

STREET _____

CITY _____ STATE _____ ZIP _____

TOTAL 600.00

FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment