

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 # 32825
 Name: Pioneer Exploration, LTD.
 Address: 15603 Kuykendahl Suite 200
 City/State/Zip: Houston, Texas 77090-3655
 Purchaser: _____
 Operator Contact Person: Shelia Bolding
 Phone: (281) 893-9400 Ext 234
 Contractor: Name: Ace Drilling
 License: 33006
 Wellsite Geologist: _____
 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. _____

<u>04/05/04</u>	<u>04/13/04</u>	<u>06/27/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 04 2004
CONSERVATION DIVISION
WICHITA, KS

API No. 15 - 095-21874-00-00
 County: Kingman
C2 E2 NE Nw Sec. 31 Twp. 30 S. R. 8 East West
760 feet from S N (circle one) Line of Section
2310 feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Conrardy Well #: 6-31
 Field Name: Spivey Grabs Basil
 Producing Formation: Mississippian (Chat)
 Elevation: Ground: 1641 Kelly Bushing: 1644
 Total Depth: 4502 Plug Back Total Depth: 4431
 Amount of Surface Pipe Set and Cemented at 220 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 see 10.11.04
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume 240 bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: Messenger Petroleum
 Lease Name: Nicholas SWD License No.: 4706
 Quarter _____ Sec. 20 Twp. 30 S. R. 8 East West
 County: Kingman Docket No.: D-25073

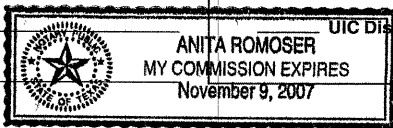
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Shelia R Bolding
 Title: Regulatory Analyst Date: 27 September 2004
 Subscribed and sworn to before me this 27 day of September,
 20 04.
 Notary Public: [Signature]
 Date Commission Expires: 11-9-07

KCC Office Use ONLY

Letter of Confidentiality Received
 If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution



ORIGINAL

Operator Name: Pioneer Exploration, LTD. Lease Name: Conrardy Well #: 6-31
 Sec. 31 Twp. 30 S. R. 8 East West County: Kingman

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: Dual Induction Log	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Topeka</td> <td>3003</td> <td>-1359</td> </tr> <tr> <td>Heebner</td> <td>3383</td> <td>-1739</td> </tr> <tr> <td>Lansing</td> <td>3608</td> <td>-1964</td> </tr> <tr> <td>Stark Shale</td> <td>4024</td> <td>-2380</td> </tr> <tr> <td>B/Kansas City</td> <td>4111</td> <td>-2467</td> </tr> <tr> <td>Cherokee</td> <td>4257</td> <td>-2613</td> </tr> <tr> <td>Mississippian</td> <td>4326</td> <td>-2682</td> </tr> </table>	Name	Top	Datum	Topeka	3003	-1359	Heebner	3383	-1739	Lansing	3608	-1964	Stark Shale	4024	-2380	B/Kansas City	4111	-2467	Cherokee	4257	-2613	Mississippian	4326	-2682
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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	12-1/4	8-5/8	24.0 J-55	275	60/40	200	
Long String	7-7/8	4-1/2	10.5 J-55	4475	ACS	170	

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
	4327-40	Acidize 2000/Frac 36000 gals + 50000 # sand	
	4344-50		
	4354-58		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8	4403	n/a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
06/27/04		<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
	4	300	33	7500

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

