

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

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 SIOW 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>05/28/04</u>	<u>06/05/04</u>	<u>07/27/04</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 - 077-21484-00-00
 County: Harper
SE NW NW Sec. 23 Twp. 31 S. R. 9 East West
990 feet from S (N) (circle one) Line of Section
990 feet from E (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE (NW) SW
 Lease Name: Martin "B" Well #: 8-23
 Field Name: Spivey Grabs Basil
 Producing Formation: Mississippian Chat
 Elevation: Ground: 1603 Kelly Bushing: 1603
 Total Depth: 4520 Plug Back Total Depth: 4510
 Amount of Surface Pipe Set and Cemented at 200 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 Review 10.7.04
 (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

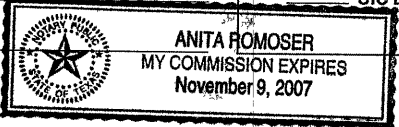
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: 28 Sept 2004
 Subscribed and sworn to before me this 28 day of September,
 2004.
 Notary Public: Anita Romoser
 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: Martin "B" Well #: 8-23
 Sec. 23 Twp. 31 S. R. 9 East West County: Harper

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:	<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>Wabunsee</td> <td>2504</td> <td>-898</td> </tr> <tr> <td>Howard</td> <td>2924</td> <td>-1318</td> </tr> <tr> <td>Topeka</td> <td>3108</td> <td>-1502</td> </tr> <tr> <td>Heebner Shale</td> <td>3494</td> <td>-1888</td> </tr> <tr> <td>Lansing</td> <td>3696</td> <td>-2050</td> </tr> <tr> <td>Stark Shale</td> <td>4096</td> <td>-2490</td> </tr> <tr> <td>Cherokee Shale</td> <td>4326</td> <td>-2720</td> </tr> <tr> <td>Mississippian</td> <td>4407</td> <td>-2801</td> </tr> </table>	Name	Top	Datum	Wabunsee	2504	-898	Howard	2924	-1318	Topeka	3108	-1502	Heebner Shale	3494	-1888	Lansing	3696	-2050	Stark Shale	4096	-2490	Cherokee Shale	4326	-2720	Mississippian	4407	-2801
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Mississippian	4407	-2801																										

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	271	60/40	200	
Long String	7-7/8	4-1/2	10.5 J-55	4520	ACS	215	

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 <i>(Amount and Kind of Material Used)</i>	Depth
	4424-64	Acidize 3000 Frac 57000 Gals + 80000 # Sd	
	4472-80		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8	4493	TAC	
Date of First, Resumerd Production, SWD or Enhr.		Producing Method		
07/27/04		<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 Gravity
	3.3	20	50	6666

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) _____	_____



TREATMENT REPORT

Customer ID		Date	
Customer Pioneer Explor		6-6-04	
Lease Martin B		Lease No.	Well # 8
Field Order # 8676	Station Pratt 1CS	Casing 4 1/2	Depth 4519
Type Job Long String New Well		County Harper	State KS
		Formation	Legal Description 23-31-9w

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 4 1/2	Tubing Size	Shots/Ft 1.44 ^{A2}	15.0	Acid 200 ml AA-2 'H' 10	Flu Salt	RATE 2000	PRESS 2000	ISIP
Depth 4485	Depth P3TD	From	To	Pre Pad 5.6 1.8 FLW-372 .75	Max Blok 1.5 F			5 Min.
Volume 71.3	Volume	From	To	Pad 15 sk 60-40 por	Min			10 Min.
Max Press 2000	Max Press	From	To	Frags 31.2 Bbli 5'L	Avg			15 Min.
Well Connection	Annulus Vol.	From	To		HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush 20 Bbli Salt 12 mi f	Gas Volume			Total Load

Customer Representative Dean	Station Manager Dave Autry	Treater D. Scott
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Service Units	118	46	57	81	75
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
0700					On Loc w/Trki Safety mtg F.S. Bottom Baffle Top S.J. Cent 1-4-6-8-10 Basket 14 Csg on Bottom Drop Baller Circ w/Rig
1417	200		20	4	St Salt flush
1417	200		12	4	St mud flush
1419	200		5	4	H2O spacer shut down top off H10 tank
1432	100		51.2	3.2	Mix Cont @ 13.0 ppg 200 ski
1451	0		10	5	Close In & Wash Pump & line
1453	0			4	Release Plug & St Disp w/2% KCL
1502	200		48	4	48 Bbli Disp out 1/2 hr Cont
1510	1500		71.3	0	Plug Down & ps. Test Csg
1512	0				Release pr. float hold Good Circ Thru Joh ✓ Plug R.H. w/1.5 sk 60-40 por only Disp @ 4 Bpm Tank valve on rig Tank leaking

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OCT 04 2004

CONSERVATION DIVISION
WICHITA KS

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

White - Accounting • Canary - Customer • Pink - Field Office

Taylor Printing, Inc.



INVOICE NO.
Date 6-6-04
Customer ID

Subject to Correction

FIELD ORDER 8676

Lease Martin B	Well # 8	Legal 23-31c-9w
County Harper	State KS	Station Pratt KS
Depth	Formation TP = 4525	Shoe Joint 39.50
Casing 4 1/2	Casing Depth 4519	TD 4520
Customer Representative	Treasurer D. Scott	

CHARGE

Pioneer Exploration

AFE Number	PO Number
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Materials Received by **X Dean Howard**

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D105	200 sk	AA-2 Premium				
D203	15 sk	60-40 per Common				
C195	151 lb	FLA-322				
C221	1034 lb	Salt fine				
C243	19 lb	Defoamer				
C312	141 lb	Gas Blak				
C321	997 lb	Gilsonite				
C221	400 lb	Salt for flush				
C302	500 gal	mud flush				
F100	5 ea	Centralizer, 4 1/2				
F120	1 ea	Cmt Basket "				
F210	1 ea	Float shoe 6/11 "				
F170	1 ea	L.D. Plug & Baffle "				
C141	5 gal	CC-1				
E100	1 ea	Pickup mi lway 4.5 mi				
E100	1 ea	Trk mi lway 4.5 mi				
F104	452 +m	Bulk Delv chg				
E107	215 sk	Cmt Serv chg				
R207	1 ea	Pump chg				
R701	1 ea	Cmt Head Rental				
Discounted Price = 8357.98						

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WICHITA, KS

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. 15332

Federal Tax I.D.#

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

SERVICE POINT:
MEDICINE LODGE

DATE <u>5-28-04</u>	SEC. <u>23</u>	TWP. <u>31s</u>	RANGE <u>9W</u>	CALLED OUT <u>7:00 P.M.</u>	ON LOCATION <u>8:45 P.M.</u>	JOB START <u>10:10 A.M.</u>	JOB FINISH <u>10:30 P.M.</u>
LEASE <u>MARTIN</u>	WELL # <u>B"8-23</u>	LOCATION <u>KEYSTONE CHURCH 2 1/2 S</u>	COUNTY <u>HARRIS</u>	STATE <u>KANSAS</u>			
OLD OR NEW (Circle one)		<u>1/4E, 1/2N, 1/4W INTG</u>					

CONTRACTOR ACE DRILL-N

TYPE OF JOB SURFACE CASING

HOLE SIZE 12 1/4" T.D. 271'

CASING SIZE 8 5/8" X 2 1/4" DEPTH 271'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 300* MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 20'

PERFS. _____

DISPLACEMENT 16 BBLs. WATER

OWNER PIONEER EXPLORATION

CEMENT AMOUNT ORDERED

200s x 60:40:2 + 2% CC

+ 1% AM. CHLORIDE

COMMON	<u>120</u>	<u>A</u>	@	<u>7.65</u>	<u>918.00</u>
POZMIX	<u>80</u>		@	<u>4.00</u>	<u>320.00</u>
GEL	<u>4</u>		@	<u>11.00</u>	<u>44.00</u>
CHLORIDE	<u>4</u>		@	<u>30.00</u>	<u>120.00</u>
AM. CHLORIDE	<u>3</u>		@	<u>31.50</u>	<u>94.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER KEVIN PRINGARD

360-302 HELPER MIKE RUCKER

BULK TRUCK

364 DRIVER DARIN FRANKLIN

BULK TRUCK

_____ DRIVER _____

HANDLING	<u>211</u>	@	<u>1.25</u>	<u>263.75</u>
MILEAGE	<u>211 X 28</u>		<u>.04</u>	<u>298.40</u>

TOTAL 2055.65

REMARKS:

SERVICE

RUN 5 JTS B78" + BREAK

CIRCULATION

MIX 200s x 60:40:2 + 2% CC

+ 1% AMMONIUM CHLORIDE

DISPLACE FLUG TO 231' WITH 103A₂

CEMENT DED. CIRCULATE

DEPTH OF JOB	<u>271'</u>		
PUMP TRUCK CHARGE	<u>0.300'</u>		<u>520.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>28</u>	@	<u>4.00</u>
		@	
		@	

TOTAL 632.00

CHARGE TO: PIONEER EXPLORATION

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>B78" SURFACE</u>	@	<u>45.00</u>	<u>45.00</u>
	@		
	@		
	@		

TOTAL 45.00

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.

TAX	_____
TOTAL CHARGE	<u>632.00</u>
DISCOUNT	<u>632.00</u> IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____

ANY APPLICABLE TAX
WILL BE CHARGED
UPON INVOICING

CONSERVATION DIVISION
WICHITA, KS

OCT 04 2004

KANSAS CORPORATION COMMISSIONER