

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

P&A

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 30489
Name: T-J Resources, Inc.
Address: P.O. Box 1330
City/State/Zip: Lawrence, KS 66044
Purchaser: N/A
Operator Contact Person: Jerry L. Donnelly
Phone: (785) 760-4022
Contractor: Name: Murfin Drilling Company, Inc.
License: 30606
Wellsite Geologist: Paul Gunzelman

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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>05-02-03</u>	<u>05-09-03</u>	<u>05-09-03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15179211090000
County: Sheridan
NW SE Sec. 23 Twp. 6 S. R. 30 East West
1875 feet from (S) N (circle one) Line of Section
1875 feet from (E) (SW) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW (SW)
Lease Name: Baker Well #: 1
Field Name: Wildcat
Producing Formation: None
Elevation: Ground: 2902 Kelly Bushing: 2907
Total Depth: 4490 Plug Back Total Depth: N/A
Amount of Surface Pipe Set and Cemented at 326 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set N/A 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) *Paul Gunzelman 6-03*
Chloride content 1000 ppm Fluid volume 300 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: N/A
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: Carol Ann Simon
Title: Secretary Date: 07-29-03
Subscribed and sworn to before me this 29 day of July
20 03
Notary Public: Janet K. Runkle
Date Commission Expires: 10-11-05

JANET K. RUNKLE
Notary Public - State of Kansas
My Appt. Expires 10-11-05

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

Operator Name: T-J Resources, Inc. Lease Name: Baker Well #: 1
 Sec. 23 Twp. 6 S. R. 30 East West County: Sheridan

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 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:

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<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Name	Top	Datum
Stone Corral	2601	+306
Base Anhydrite	2641	+266
Topeka	3645	-738
Heebner Shale	3951	-1044
Toronto	3980	-1073

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	# Sacjs Used	Type and Percent Additives
Surface Pipe	10 3/4	8 5/8	22	326	Common	200	None

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	N/A			

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
N/A			

TUBING RECORD		Size	Set At	Packer At	Liner Run
N/A					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
N/A		<input type="checkbox"/> Flowing <input 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
	N/A				

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

ALLIED CEMENTING CO., INC.
 P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

***** ORIGINAL *****

* INVOICE *

Invoice Number: 089851

Invoice Date: 05/08/03

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Sold T-J Resources, Inc.
 To: P. O. Box 1330
 Lawrence, KS
 66044-1330

Cust I.D.....: T-J
 P.O. Number...: Baker #1
 P.O. Date.....: 05/08/03

Due Date.: 06/07/03
 Terms....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	200.00	SKS	8.3500	1670.00	T
Gel	4.00	SKS	10.0000	40.00	T
Chloride	7.00	SKS	30.0000	210.00	T
Handling	200.00	SKS	1.1500	230.00	E
Mileage (36)	36.00	MILE	10.0000	360.00	E
200 sks @\$.05 per sk per mi					
Surface	1.00	JOB	520.0000	520.00	E
Mileage pmp trk	36.00	MILE	3.5000	126.00	E
Surface 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 \$320.10
 ONLY if paid within 30 days from Invoice Date

Subtotal:	3201.00
Tax.....:	123.80
Payments:	0.00
Total....:	3324.80
	<u>- 320.10</u>
	3004.70

ALLIED CEMENTING CO., INC. 11206

ORIGINAL

Federal Tax I.D.# [REDACTED]

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

SERVICE POINT:
Oakley

DATE <u>5-2-03</u>	SEC <u>23</u>	TWP <u>6S</u>	RANGE <u>30W</u>	CALLED OUT	ON LOCATION <u>10:30 AM</u>	JOB START <u>6:00 AM</u>	JOB FINISH <u>6:30 AM</u>
LEASE <u>Baker</u>	WELL# <u>1</u>	LOCATION <u>Bretford SNE I E NIN</u>		COUNTY <u>Sheridan</u>	STATE <u>KS</u>		

OLD OR NEW (Circle one)

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CONTRACTOR <u>Murfin Drig Rig 3</u>	OWNER <u>Same</u>
TYPE OF JOB <u>Surface</u>	CEMENT
HOLE SIZE <u>12 1/4</u> T.D. <u>326'</u>	AMOUNT ORDERED
CASING SIZE <u>8 3/8</u> DEPTH <u>326'</u>	<u>200 SKS COM 3% CC 2% GEL</u>
TUBING SIZE DEPTH	
DRILL PIPE DEPTH	
TOOL DEPTH	
PRES. MAX MINIMUM	COMMON <u>200 SKS @ 8.35 1670.00</u>
MEAS. LINE SHOE JOINT	POZMIX @
CEMENT LEFT IN CSG. <u>15'</u>	GEL <u>4 SKS @ 10.00 40.00</u>
PERFS.	CHLORIDE <u>7 SKS @ 30.00 210.00</u>
DISPLACEMENT <u>19 3/4 Bbls</u>	@
EQUIPMENT	@
	@
	@
	@
	@
PUMP TRUCK CEMENTER <u>Dean</u>	HANDLING <u>200 SKS @ 1.15 230.00</u>
# <u>191</u> HELPER <u>Andrew</u>	MILEAGE <u>54 SK / Miles 360.00</u>
BULK TRUCK	
# <u>315</u> DRIVER <u>Larry</u>	
BULK TRUCK	
# DRIVER	TOTAL <u>2570.00</u>

REMARKS:

SERVICE

Cement did circulate ✓

DEPTH OF JOB	
PUMP TRUCK CHARGE	<u>520.00</u>
EXTRA FOOTAGE @	
MILEAGE <u>36 Miles @ 3.50</u>	<u>126.00</u>
PLUG <u>8 3/8 Surface @</u>	<u>45.00</u>
@	
@	
TOTAL	<u>691.00</u>

CHARGE TO: T-J Resources Inc
STREET P.O. Box 1330
CITY Lawrence STATE KS ZIP 66044-1330

FLOAT EQUIPMENT

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

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.

SIGNATURE Kathleen R. [Signature]

TOTAL _____
TAX _____
TOTAL CHARGE _____
DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME