

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY, DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address: 125 N. Market, Suite 1000 Apx 17' W of E2 SE NW Sec. 5 Twp. 32 S. R. 12 East West
City/State/Zip: Wichita, Kansas 67202-1775
Purchaser: Bluestem Gas Mktg & American Pipeline / Plains Mktg
Operator Contact Person: Dean Pattison, Operations Manager
Phone: (316) 267-4379 ext 107
Contractor: Name: Duke Drilling Co., Inc.
License: 5929

API No. 15 - 007-22891-00-00
County: Barber
1980' FNL feet from S / (N) (circle one) Line of Section
2193' FWL feet from E / (W) (circle one) Line of Section

Wellsite Geologist: Roger L. Martin
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Clarke 'A' Well #: 1
Field Name: Medicine River SW

If Workover/Re-entry: Old Well Info as follows:
Operator: n/a
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. _____

Producing Formation: Mississippian
Elevation: Ground: 1485 Kelly Bushing: 1496
Total Depth: 4735 Plug Back Total Depth: 4319
Amount of Surface Pipe Set and Cemented at 225 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.

04/18/05 04/26/05 05/26/05
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used Haul off free fluids and allow to dehydrate
Location of fluid disposal if hauled offsite:
Operator Name: Oil Producers of Kansas
Lease Name: Watson SWD License No.: 8061
Quarter _____ Sec. 8 Twp. 29 S. R. 15 East West
County: Pratt Docket No.: D-24,324

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: _____
Subscribed and sworn to before me this 5th day of August,
20 05
Notary Public: Debra K. Clingan
Date Commission Expires: March 15, 2006

KCC Office Use ONLY

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

