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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

ORIGINAL

Operator: License # 33036
Name: Strata Exploration, Inc.
Address: PO Box 401
City/State/Zip: Fairfield, IL 62837
Purchaser: Oneok/Plains
Operator Contact Person: John R. Kinney
Phone: (618) 897-2799
Contractor: Name: Abercrombie RTD, Inc.
License: 30684
Wellsite Geologist: Jon Christensen

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. _____
7/26/2005 8/7/2005 8/20/2005
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 081216040000
County: Haskell
E/2 - E/2 - NW. Sec. 22 Twp. 29 S. R. 32 East West
1320 feet from S (circle one) Line of Section
2310 feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Kelman Well #: 3
Field Name: Lockport
Producing Formation: St. Louis
Elevation: Ground: 2896 Kelly Bushing: 2904
Total Depth: 5650 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 1789 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 3354 Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 5100 ppm Fluid volume 1500 bbls
Dewatering method used evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
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: John R. Kinney
Title: President Date: 9/12/2005
Subscribed and sworn to before me this 12th day of September,
2005.
Notary Public: Barbara Feather
Date Commission Expires: 12-30-06

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

OFFICIAL SEAL
Barbara Feather
Notary Public, State of Illinois
My Commission Expires: 12/30/06