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FEB 13 2003

KCC WICHITA

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

CONFIDENTIAL

Operator: License # 30604
Name: Raydon Exploration, Inc.
Address: 9400 N. Broadway, Ste. 400
City/State/Zip: Oklahoma City, OK 73114
Purchaser: Duke
Operator Contact Person: Keith Hill
Phone: (620) 624-0156
Contractor: Name: Big A Drilling
License: 31572
Wellsite Geologist: Ed Grieves

KCC

FEB 12 2003

CONFIDENTIAL

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

RELEASED
FROM
CONFIDENTIAL

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. _____

11-06-02	11-20-02	1-16-03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 119-210950000
County: Meade
E/2 NW SW Sec. 26 Twp. 34 S. R. 30 East West
1980 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: Cimarron Well #: 2-26
Field Name: Adams Ranch
Producing Formation: Morrow
Elevation: Ground: 2646' Kelly Bushing: 2658'
Total Depth: 6466' Plug Back Total Depth: 6034'
Amount of Surface Pipe Set and Cemented at 1646 Feet
Multiple Stage Cementing Collar Used? Yes No
 Yes No show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmf.

Drilling Fluid Management Plan *Ed Grieves*
(Data must be collected from the Reserve Pit)
Chloride content 7000 ppm Fluid volume _____ bbls
Dewatering method used _____
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: [Signature]
Title: Agent for Raydon Ex. Date: 2-12-03
Subscribed and sworn to before me this 12th day of February,
2003
Notary Public: [Signature]
Date Commission Expires: _____

NOTARY PUBLIC, State of Kansas
Seward County
HELEN M. SMITH
My Appt. Exp. 3-5-2005

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

Operator Name: Raydon Exploration, Inc. Lease Name: Cimarron Well #: 2-26
 Sec. 26 Twp. 34 S. R. 30 East West County: Meade

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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: Spectral Density Dual Spaced Neutron II Log High Resolution Induction Log Microlog	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Chase 2672 Base Heebner 4489 Marmaton 5321 Morrow 5886 Chester 5973
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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#	1646'	Midcon CC	365	3%cc, 1/2# flocc
					Prem Plus C	150	2%cc, 1/4# flocc
Production	7-7/8"	4-1/2"	10.5#	6112'	Premium "H"	110	10% cc, 10% salt

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
4	5926-5935'	Acidize with 1500 gal 7.5% FE acid with additives	
	" "	Frac with 27,000 gal 25# Delta Frac	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-3/8"	5886'			
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
1-16-03			<input checked="" 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	
	39	250	0	6.44 MCF per BBL	42.8	

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

HALLIBURTON JOB SUMMARY

REGION Central Operations		MNA / COUNTRY Mid Continent/USA		SALES ORDER NUMBER 2126596		TICKET DATE ORIGINAL	
MBU ID / EMPL # MCL1 0110 / 198516		H.E.S. EMPLOYEE NAME JASON CLEMENS		BDA / STATE MC/Ks		COUNTY MEADE	
LOCATION LIBERAD		COMPANY RAYDON EXPLORATION		PSL DEPARTMENT ZI		CUSTOMER REP / PHONE KEITH HILL 620-629-0394	
TICKET AMOUNT \$7,757.36		WELL TYPE OIL		API/UMI #		SAP BOMB NUMBER 7521	
WELL LOCATION MEADE		DEPARTMENT ZI		HES FACILITY (CLOSEST TO WELL SITE) LIBERAL		Cement Surface Casing	
LEASE NAME CIMARRON		Well No. 2-26		SEC / TWP / RNG 26 - 34S - 30W		FEB 12 2003	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198516	5.0			
Harper, K 241985	5.0			
Ferguson, R 106154	5.0			
Kelly, Chad 259395	5.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
421269	40			
10251403	40			
10240236/10240244	20			
54029/6610	20			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	11/7/2002	11/7/2002	11/7/2002	11/7/2002
Time	1400	1800	2130	2315

Tools and Accessories

Type and Size	Qty	Make
Float Collar		HES
Float Shoe		
Centralizers	4	
Top Plug	1	
HEAD	1	
Limit clamp	1	
Weld-A	X	
Guide Shoe	1	
BTM PLUG		

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	N	24#	8 5/8		KB	1,646	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			12 1/4				Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

Mud Type _____	Density _____	Lb/Gal _____
Disp. Fluid _____	Density _____	Lb/Gal _____
Prop. Type _____	Size _____	Lb _____
Prop. Type _____	Size _____	Lb _____
Acid Type _____	Gal. _____	% _____
Acid Type _____	Gal. _____	% _____
Surfactant _____	Gal. _____	In _____
NE Agent _____	Gal. _____	In _____
Fluid Loss _____	Gal/Lb _____	In _____
Gelling Agent _____	Gal/Lb _____	In _____
Fric. Red. _____	Gal/Lb _____	In _____
Breaker _____	Gal/Lb _____	In _____
Blocking Agent _____	Gal/Lb _____	In _____
Perfpac Balls _____	Qty. _____	
Other _____		
Other _____		
Other _____		
Other _____		

Hours On Location

Date	Hours	Date	Hours	Description of Job
11/7	5.0	11/7	2.0	Cement Surface Casing
Total	5.0	Total	2.0	

Ordered _____	Hydraulic Horsepower Avail. _____	Used _____
Treating _____	Average Rates in BPM Disp. _____	Overall _____
Feet 44	Cement Left in Pipe Reason _____	SHOE JOINT

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	365	MIDCON PP C	BULK	3% CC - 1/2# FLOCELE	20.36	3.25	11.10
2	150	PREM PLUS C		2% CC - 1/4# FLOCELE	6.30	1.34	14.80
3							
4							

Summary

Circulating Breakdown _____	Displacement _____	Preflush: BBI _____	Type: FRESH
Lost Returns _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad:Bbl -Gal _____
Cmt Rtrn#Bbl _____	Lost Returns-1 _____	Excess /Return BBI _____	Calc.Disp Bbl _____
Average _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. 102
Shut In: Instant _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp:Bbl _____
	5 Min. _____	Cement Slurry BBI _____	
	15 Min. _____	Total Volume BBI 354.00	

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____
THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____ SIGNATURE _____

HALLIBURTON JOB SUMMARY

SALES ORDER NUMBER 2149896	TICKET DATE 11/19/02
BDA / STATE MC/Ks	COUNTY SEWARD
PSL DEPARTMENT ZI	ORIGINAL
CUSTOMER REP / PHONE KEITH HILL	
API/AMI #	
SAP BOMB NUMBER 7523	Cement Production Casing
HES FACILITY (CLOSEST TO WELL SITE) LIBERAL	

REGION Central Operations	MVA / COUNTRY Mid Continent/USA
MBU ID / EMPL # MCL1 01101198516	H.E.S. EMPLOYEE NAME JASON CLEMENS
LOCATION LIBERAL	COMPANY RAYDON EXPLORATION
TICKET AMOUNT \$6,123.42	WELL TYPE OIL
WELL LOCATION MEADE	DEPARTMENT ZI
LEASE NAME CIMARRON	Well No. 2-26 SEC / TWP / RNG 26 - 34S - 30W

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FEB 12 2003

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198516	7.0			
Cochran, M 217398	7.0			
Oliphant, C 243055	7.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
421269	40			
10251403	40			
10011406/10011590	20			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	11/19/2002	11/20/2002	11/20/2002	11/20/2002
Time	2100	100	735	810

Tools and Accessories

Type and Size	Qty	Make
Float Collar		HES
Float Shoe		
Centralizers	6	
Top Plug	1	
HEAD	1	
Limit clamp	1	
Weld-A	1	
Guide Shoe	1	
BTM PLUG		

Well Data

New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	N	10.5	4 1/2	KB	6,112	
Liner						
Liner						
Tubing						
Drill Pipe						
Open Hole			7 7/8			Shots/Ft.
Perforations						
Perforations						
Perforations						

Materials

Mud Type	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Hours On Location	Operating Hours	Description of Job
Date	Hours	Date
11/20	7.0	11/20
Total	7.0	1.0

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Ordered	Hydraulic Horsepower Avail.	Used
Treating	Average Rates in BPM Disp.	Overall
Feet 42	Cement Left in Pipe Reason	SHOE JOINT

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	135	PREMIUM H		10% CALSEAL - 10% SALT - 5# GILSONITE - 6/10% HALAD-322 - .25% D-All	6.06	1.47	15.00
2							
3							
4							

Summary

Circulating Breakdown	Displacement	Preflush: BBI	12.00	Type: MUDFLUSH
Lost Returns	MAXIMUM	Load & Bkdn: Gal - BBI		Pad:Bbl -Gal
Cmt Rtrn#Bbl	Actual TOC	Excess /Return BBI		Calc.Disp Bbl
Average	Frac. Gradient	Calc. TOC:		Actual Disp. 97
Shut In: Instant	5 Min. _____ 15 Min. _____	Treatment: Gal - BBI		Disp:Bbl
		Cement Slurry BBI	29.0	
		Total Volume BBI	138.00	

Frac Ring #1 | **Frac Ring #2** | **Frac Ring #3** | **Frac Ring #4**

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____ SIGNATURE _____