

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

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ORIGINAL

Operator: License # 5003
Name: McCoy Petroleum Corp.
Address: 453 S. Webb Rd. Box 780208
City/State/Zip: Wichita, Ks 67278
Purchaser: Gas-Midcan Plant
Operator Contact Person: Scott Hampel
Phone: (316) 636-2737
Contractor: Name: Sterling Drilling Co.
License: 5142
Wellsite Geologist: Chris Peters

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD slow Temp. App.
 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. _____

03-25-03	04-04-03	05-09-03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 047-21476-00-00
County: Edwards
W/2 NE NE SE Sec. 33 Twp. 25 S. R. 20 East West
2310 feet from S N (circle one) Line of Section
480 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Froetschner-Birzer Unit Well # 2-33
Field Name: Trenton
Producing Formation: Mississippian
Elevation: Ground 2230' Kelly Bushing 2239'
Total Depth 4693' Plug Back Total Depth 4650'
Amount of Surface Pipe Set and Cemented at 331 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate 11 completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

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Drilling Fluid Management Plan *All 1 up 7-17-03*
(Data must be collected from the Reserve Pit)
Chloride content 31,000 ppm Fluid volume 1,200 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. * _____

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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* Scott Hampel
Title: Production/Engineering Mgr Date: _____

Subscribed and sworn to before me this 3rd day of July
2003

Notary Public, Dianne Howard

Date Commission Expires 03-15-07

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____

Well Log Received
 Geologist Report Received
 Distribution

DIANNE HOWARD
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-15-07

✓

X

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Side Two

ORIGINAL

Operator Name: McCoy Petroleum Corp. Lease Name: Froetschner-Birzer Unit Well #: 2-93
Sec 33 Twp 25 S. R 20 East West County: Edwards

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 [X] Yes [] No (Attach additional Sheets)

Samples Sent to Geological Survey [X] Yes [] No

Cores Taken [] Yes [X] No

Electric Log Run [X] Yes [] No (Sub-It Copy)

List All E. Logs Run: Micro Log, Dual Induction, Compensated

Density Neutron, Cement Bond

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[X] Log Formation (Top), Depth and Datum [] Sample

Name Top Datum

Heebner 3950 (-1711) Ft Scott 4570 (-2331)

Br Lime 4062 (-1823) Cherokee 4593 (-2354)

Lansing 4072 (-1833) Mississippian 4674 (-2435)

Lansing B 4104 (-1865) RTD 4696 (-2457)

Stark Shale 4324 (-2085)

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CASING RECORD [X] New [] Used

Report all strings set-conductor, surface, intermediate, production, etc.

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Table with 8 columns: 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. Rows include Surface and Production data.

ADDITIONAL CEMENTING / SQUEEZE RECORD

Table with 5 columns: Purpose, Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives. Includes options for Perforate, Protect Casing, Plug Back TD, Plug Off Zone.

Table with 3 columns: Shots Per Foot, PERFORATION RECORD - Bridge Plugs Set/Type, Acid, Fracture, Shot, Cement Squeeze Record. Includes a 'RELEASED FROM CONFIDENTIAL' stamp.

TUBING RECORD table with columns: Size, Set At, Packer At, Liner Run. Includes values for 2 3/8" size and 4645' set at.

Table with columns: Date of First, Resumed Production, SWD or Enhr., Producing Method. Includes date 5-20-03 and method [X] Flowing.

Table with columns: Estimated Production Per 24 Hours, Oil Bbls., Gas MCI, Water Bbls., Gas-Oil Ratio, Gravity. Includes values for 3 oil bbls and 2142 gas MCI.

Disposition of Gas METHOD OF COMPLETION Production Interval. Includes checkboxes for Vented, Sold, Used on Lease, Open Hole, Pert., Dually Comp., Commingled, Other (Specify).



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ORIGINAL TREATMENT REPORT

Customer ID: CONFIDENTIAL
 Customer: M'Loy Pet
 Lease: Froetshner-Birzer Unit
 Date: 3-26-03
 Well #: 2-33
 Field Order #: 3845
 Station: Pratt KS
 Casing: 8 7/8
 Depth: 328
 County: Edwards
 State: KS
 Type Job: Surface New well
 Formation:
 Legal Description: 33-25s-20w

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 8 7/8	Tubing Size	Shots/Ft		Acid 250sk. 60/40 poz		RATE	PRESS	ISIP
Depth 320	Depth PBD	From	To	Pre Pad 320cc 1/4 # C.F.	Max		500	5 Min.
Volume 20.4	Volume	From	To	Pad 1.25 #3 14.5ppg	Min			10 Min.
Max Press 300	Max Press	From	To	Fract 38 Bbl 15L	Avg			15 Min.
Well Connection	Annulus Vol.	From	To	Flush 120	HHP Used			Annulus Pressure
Plug Depth	Packer Depth	From	To		Gas Volume			Total Load

Customer Representative: Lanny Salaga
 Station Manager: Dave Autry
 Treater: D. Scott
 Service Units: 106 27 36 76

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
2100					Onloc w/Trki Safety mtg
					Log on Bottom Break Circ w/Rig
0157	200	58		6	Mix amt @ 14.5ppg 250sk
0207	0			0	Chase In + Release wood Plug
0208	100			4	St Disp w/H ₂ O
0214	200	20.4		0	Disp In + Close In w/H ₂ O
					Circ 5 Bbls amt = 23sk amt ✓
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Job Complete Thank you Scotty					

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ORIGINAL



INVOICE NO.
Date 5-26-03
Customer ID

JUL 01 2003
Subject to Correction

FIELD ORDER 5845

Lease CONFIDENTIAL Bitter Unit	Well # 2-33	Legal 33-25s-20w
County Edwards	State KS	Station Pratts
Depth	Formation TP=330' 23ppf	Shoe Joint 10'-Required
Casing 8 5/8	Casing Depth 328	TD 330
Customer Representative Lanny Saloga	Treater D. Scott	Job Type Surface New Well

Mcloy Pet Corp

CHARGE

A/E Number	PO Number
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Materials Received by X Lanny Saloga

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D203	250sk.	60/40 por Common	✓			
C194	62 Lb.	Cell/Flake	✓			
C310	645 Lb.	Calcium Chloride	✓			
E163	1 eq.	Tap Wood Plug 8 5/8	✓			
C228	25 Lb.	Sugar	✓			
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E107	250sk.	Cmt Serv Chg				
E100	1 eq.	UNITS 1 way MILES 65				
E104	699tm	TONS 1 way MILES 65				
R201	1 eq.	EA. 301-500' PUMP CHARGE				
R701	1 eq.	Cmt Head Rental				
Discounted Price =				3632.21		

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

TOTAL