

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 163-23304 - 00-00

County Rooks

-NW - NW -SW Sec. X 7 Twp. 8s Rge. 16w E

2310 Feet from (S)W (circle one) Line of Section

330 Feet from E(W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or (SW) (circle one)

Lease Name Chesney Well # H-1

Field Name Medicine Creek

Producing Formation ~~Fansing/Kansas City~~ NONE

Elevation: Ground 1936' KB 1941'

Total Depth 3334' PBDT _____

Amount of Surface Pipe Set and Cemented at 203 Feet

Multiple Stage Cementing Collar Used? XX Yes _____ No

If yes, show depth set 1269' Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan PHA, 7-9-99 U.C.
(Data must be collected from the Reserve Pit)

Not Available

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

Operator: License # 30730

Name: Horizontal Development & Production, Inc

Address P.O. Box 12728

City/State/Zip Dallas, TX 75225

Purchaser: None

Operator Contact Person: MX Mike Sternberg

Phone (214) 363-8332 3-29-99

Contractor: Name: Von Feldt Drilling

License: _____

Wellsite Geologist: Ron Nelson

Designate Type of Completion
XX New Well _____ Re-Entry _____ Workover _____

Oil SWD S10W Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back _____ PBDT
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) _____ Docket No. _____

8-18-98 8-22-98 8-23-98
Spud Date Date Reached TD Completion Date

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 on 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 Michael Sternberg

Title Vice President Date 03/24/99

Subscribed and sworn to before me this 24 day of March 19 99.

Notary Public Misty M. Barnard

Date Commission Expires Nov 4, 2002



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

Operator Name Horizontal Development & Production Lease Name Chesney Well # H-1
 Sec. 7 Twp. 8s Rge. 16w East West
 County Rooks

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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: R A Guard
 Neutron Density
 Sonic Cement Bond

Name	Top	Datum
Anhydrite	1239	+702
Topeka	2801	-860
Heebner	3016	-1075
Toronto	3036	-1095
Lansing/Kansas City	3058	-1117
Base KC	3304	-1363

CASING RECORD <input type="checkbox"/> New <input checked="" 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	20	203	60/40 poz	140	3% salt
production	7 7/8	5 1/2	14#	3335	60/40 poz	165	10% salt 5% gilsoni

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	
1	2964, 2988 1/2, 3103, 3120, 3243, 3265		
2	3152-3154		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8	3319'		

Date of First, Resumed Production, SWD or Inj. P+A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
1/2	1/2				

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

15-163-23304-00-00

JUL-07-99 03:32P

P.01

ALLIED CEMENTING CO., INC.

2818

Federal Tax I.D. ~~XXXXXXXXXX~~

PO BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: R

DATE <u>7-27-98</u>	WELL # <u>7</u>	TWR # <u>2</u>	RANGE <u>16</u>	CALLED OUT	ON LOCATION <u>10:00 AM</u>	JOB START <u>4:10 PM</u>	JOB FINISH <u>4:55 P</u>
LEASER <u>Shervin</u>	WELL # <u>H. 1</u>	LOCATION <u>Adell 25 12N 34W 4N</u>	COUNTY <u>Rooks</u>	STATE <u>Ks</u>			

OLD OR NEW (Circle one)

CONTRACTOR Van Halbe Dily

TYPE OF JOB Production String

HOLE SIZE 7 7/8 ID 3340

CASING SIZE 5 1/2 DEPTH 3335

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL Part Collar DEPTH 1276

PRES. MAX 1200 psi MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSO. 30'

PERFS

DISPLACEMENT 80% gel

OWNER

CEMENT AMOUNT ORDERED 165 cu 10% salt

5% gel

500 gal WFR-2

COMMON	99	@	6.35	628.45
POZMIX	6	@	3.15	18.90
GEL		@		
CHLORIDE		@		
<u>Salt</u>	<u>16</u>	@	<u>7.5</u>	<u>122.00</u>
<u>Water</u>	<u>709</u>	@	<u>4.15</u>	<u>2936.85</u>
<u>WFR-2</u>	<u>500 gal</u>	@	<u>1.00</u>	<u>500.00</u>

HANDLING MILEAGE 42 / gal / mile

TOTAL 2209.40

EQUIPMENT

PUMP TRUCK # 153 CEMENTER Drive

BULK TRUCK # 13 DRIVER Jacobs

REMARKS:

Plug Rod hole up 15 sk

Flood Hatched

SERVICE

DEPTH OF JOB

PUMP TRUCK CHARGE 1000.00

EXTRA FOOTAGE

MILEAGE 2.25 @ 125.00

PLUG 5.00 @ 50.00

TOTAL 1255.00

CHARGE TO: Horizontal Development & Prod Inc.

STREET 4417 Buena Vista # 117

CITY Dallas STATE Texas ZIP 75204

FLOAT EQUIPMENT

1	<u>Guide Shoe</u>	@		<u>110.00</u>
1	<u>ABU Taper</u>	@		<u>175.00</u>
6	<u>Centralizers</u>	@	<u>25.00</u>	<u>150.00</u>
1	<u>Roller</u>	@		<u>100.00</u>
1	<u>Part Collar</u>	@		<u>150.00</u>

TOTAL 2077.00

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.

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 D/

SIGNATURE Michael Sternberg

PRINTED NAME Michael Sternberg

SIGNATURE Michael Sternberg

HDP Inc

15-163-23304-0000

ALLIED CEMENTING CO., INC.

2352

Federal Tax I.D. [REDACTED]

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

SERVICE POINT Russell

DATE <u>3/24/99</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>11:00 AM</u>	JOB START <u>11:15 AM</u>	JOB FINISH <u>12:40 PM</u>
LEASE <u>Chamney</u>	WELL # <u>1</u>	LOCATION <u>Plainville 42 12 3E</u>			COUNTY <u>Roos</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one) <u>NEW</u>				<u>1 JUTD</u>			

CONTRACTOR <u>Quality</u>
TYPE OF JOB <u>OAS</u>
HOLE SIZE _____ T.D. _____
CASING SIZE <u>5 1/2"</u> DEPTH _____
TUBING SIZE _____ DEPTH _____
DRILL PIPE _____ DEPTH _____
TOOL _____ DEPTH _____
PRES. MAX _____ MINIMUM _____
MEAS. LINE _____ SHOE JOINT _____
CEMENT LEFT IN CSG. _____
PERFS. _____
DISPLACEMENT _____

OWNER <u>Same</u>
CEMENT AMOUNT ORDERED <u>190 w/40 1070 lbs</u>
<u>500 # Halls</u>
<u>USED 180 SK w/57 Halls</u>
COMMON <u>108</u> @ <u>6.35</u> <u>685.80</u>
POZMIX <u>72</u> @ <u>3.25</u> <u>234.00</u>
GEL <u>12</u> @ <u>9.50</u> <u>114.00</u>
CHLORIDE _____ @ _____
<u>Halls 5</u> @ <u>15.50</u> <u>77.50</u>
_____ @ _____
_____ @ _____
_____ @ _____
_____ @ _____
HANDLING @ <u>1.00</u> <u>199.50</u>
MILEAGE <u>44 / Sh / Mil</u> <u>304.00</u>
TOTAL <u>1614.80</u>

EQUIPMENT

PUMP TRUCK CEMENTER <u>Paul</u>
<u>345</u> HELPER <u>Mark</u>
BULK TRUCK DRIVER <u>Dave</u>
<u>254</u> DRIVER _____
BULK TRUCK DRIVER _____
_____ DRIVER _____

REMARKS:

Spot 85 SK w/200 Halls @ 1240
Spot 40 SK w/100 Halls @ 750
Circulate @ 250 w/55 SK and
100 Halls

SERVICE

DEPTH OF JOB _____
PUMP TRUCK CHARGE _____ <u>450.00</u>
EXTRA FOOTAGE @ _____
MILEAGE <u>40</u> @ <u>2.85</u> <u>114.00</u>
PLUG @ _____
_____ @ _____
_____ @ _____
TOTAL <u>564.00</u>

CHARGE TO: HDP
 STREET 4017 Buena Vista Ste 117
 CITY Dallas STATE Texas ZIP 75204

FLOAT EQUIPMENT

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

To Allied Cementing Co., Inc.

float equipment

TOTAL