

KANSAS CORPORATION COMMISSION
OIL & GAS DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5399
Name: American Energies Corporation
Address: 155 North Market, Suite 710
City/State/Zip: Wichita, KS 67202
Purchaser: _____
Operator Contact Person: Alan L. DeGood
Phone: (316) (316) 263-5785
Contractor: Name: Shawnee Well Service
License: 30346
Wellsite Geologist: None
Designate Type of Completion:
____ New Well _____ Re-Entry Workover
____ Oil _____ SWD _____ SIOW _____ Temp. Abd
____ Gas _____ ENHR _____ SIGW
____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: American Energies Corporation
Well Name: Packard D-1
Original Comp. Date: 10/13/03 Original Total Depth: 4485'
____ Deepenir 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. _____

<u>1/28/2004</u>	<u>1/31/04</u>	<u>1/28/04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API NO. 15 - 15-007-22763-000-01
County: Barber
W/2 NW - NW - NW Sec. 23 S. R. 31-13W East West
330' feet from S / (circle one) Line of Section
105' feet from E / (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE SW
Lease Name: Packard Well #: D-1
Field Name: Nurse
Producing Formation: Lower Douglas
Elevation: Ground: 1604' Kelly Bushing: 1609'
Total Depth: 3340' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 7 jts 23# 8 5/8" @ 306' 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.
AUT WHM 5-10-06
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 1,050 bbls
Dewatering method used Water was trucked
Location of fluid disposal if hauled offsite:
Operator Name: American Energies Corporation
Lease Name: Short A #1 SWD License No.: 5399
660' FSL & 1920' FEL
Quarter _____ Sec 12 Twp 31 S. R. 8W East West
County: Harper Docket No.: D-25-867

INSTRUCTIONS: An original and two copies of this form shall be filed with 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: Alan L. DeGood
Title: Alan L. DeGood, President Date: 5/1/2006
Subscribed and sworn to before me this 1st day of May,
2006
Notary Public: Melinda S. Wooten
Date Commission Expires: Melinda S. Wooten, Notary Exp. 3/12/08

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes No Date: _____
 Wireline Log Received
 UIC Distribution
RECEIVED
MAY 10 2006
KCC WICHITA



Operator Name: American Energies Corporation Lease Name: Packard Well: D-1
 Sec. 23 Twp. 31 S. R. 13 Vest County: Barber

INSTRUCTIONS: Show important tops and bas of formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval test, 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 charts(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 Yes No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run Yes No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Name Formation (Top), Depth and Datum Top <input type="checkbox"/> Sample Datum
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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"	23#	306'	60/40 poz	225	2% gel, 3% CC
Production	7 7/8"	4 1/2"	10.5#	4306'	ASC	125	500 gal. mud sweep

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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
2 SPF	Lower Douglas	1,000 gallons MIRA acid	3658-68
2 SPF	Lecompton		3359-64
2 SPF	Lecompton		3306-3312

TUBING RECORD	Size 2 3/8"	Set At 3300	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 2/4/04	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls 1 BOPD	Gas Mcf	Water Bbls	Gas-Oil Ratio	Trace	Gravity
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Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> (if vented, Sumit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Other Specify	Production Interval <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled
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RECEIVED
MAY 10 2006
KCC WICHITA