

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 # 9090
Name: CHARTER ENERGY, INC.
Address: P.O. BOX 252
City/State/Zip: GREAT BEND, KS 67530
Purchaser: COOPERATIVE REFINING, LLC.
Operator Contact Person: STEVE BAIZE
Phone: (316) 793-9090
Contractor: Name: DOC'S WELL SERVICE
License: N/A 32030 ✓
Wellsite Geologist: NONE

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

If Workover/Re-entry: Old Well Info as follows:
Operator: GLENN W. PEEL
Well Name: COOK #3

Original Comp. Date: 3-11-55 Original Total Depth: 3679
___ Deepening ___ Re-perf. XX Conv. to SWD
___ Plug Back ___ Plug Back Total Depth
___ Commingled Docket No. _____
___ Dual Completion Docket No. _____
XX Other (SWD or ~~ENHR~~) Docket No. D-27767

8-9-2000 8-28-2000 8-31-2000
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 195-00716-00-01
County: TREGO
NE SE NW Sec. 2 Twp. 11 S. R. 21 East West
1650 feet from S (N) (circle one) Line of Section
2310 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: COOK Well #: 3
Field Name: TRICO

Producing Formation: ARBUCKLE
Elevation: Ground: 2084 Kelly Bushing: 2089
Total Depth: 4160 Plug Back Total Depth: ----
Amount of Surface Pipe Set and Cemented at 200 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1552 Feet
If Alternate II completion, cement circulated from 1552
feet depth to SURFACE w/ UNKNOWN sx cmt.
AGRI WITH 5-15-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
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. R. _____ East West
County: _____ Docket No.: _____

RECEIVED
STATE CORPORATION COMMISSION

SEP 05 2000

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.

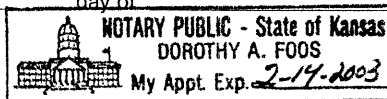
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: [Signature]
Title: PRESIDENT Date: SEPT. 2, 2000

Subscribed and sworn to before me this _____ day of _____

x8 2000

Notary Public: Dorothy A. Foss



Date Commission Expires: 2-14-2003

KCC Office Use ONLY

- ___ Letter of Confidentiality Attached
- ___ If Denied, Yes Date: _____
- ___ Wireline Log Received
- ___ Geologist Report Received
- ___ UIC Distribution

Operator Name: CHARTER ENERGY, INC. Lease Name: COOK Well #: 3
 Sec. 2 Twp. 11 S. R. 21 East West County: TREGO

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)

Log Formation (Top), Depth and Datum Sample
OLD LOG ALREADY SUBMITTED
 Name Top Datum
ARBUCKLE 3664 -1575

List All E. Logs Run:

CASING RECORD New 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	# Sacs Used	Type and Percent Additives
<i>SURFACE</i>		<i>8 5/8"</i>		<i>200'</i>	<i>UNKNOWN</i>		
<i>PRODUCTION</i>		<i>5 1/2"</i>		<i>3676'</i>	<i>UNKNOWN</i>		

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 checked="" type="checkbox"/> Plug Off Zone	<i>3664 to 3762</i>	<i>COMMON</i>	<i>75</i>	<i>SLICK IN FIRST 50 SACKS</i>

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
		RECEIVED STATE CORPORATION COMMISSION SEP 05 2000	

TUBING RECORD	Size Set At	Packer At	Liner Run
	<i>2 1/2" PLASTIC LINED @ 3651 / 3651</i>		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <i>WHEN APPROVED</i>	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <i>VAC.</i>		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.) Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

ALLIED CEMENTING CO., INC.

ORIGINAL
5572

Federal Tax I.D.# ~~XXXX~~

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

SERVICE POINT:

Oakley

DATE <u>8-14-00</u>	SEC <u>2</u>	TWP. <u>11 S</u>	RANGE <u>21</u>	CALLED OUT	ON LOCATION <u>8:30 AM</u>	JOB START	JOB FINISH <u>12:30 PM</u>
LEASE <u>COOK</u>	WELL # <u>3</u>	LOCATION <u>high N. to C.L. 1 1/2 S.S.</u>		COUNTY <u>Trego</u>	STATE <u>Kan</u>		
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR Doc's Well Service

TYPE OF JOB Squeeze

HOLE SIZE _____ T.D. 3762'

CASING SIZE 5 1/2" DEPTH _____

TUBING SIZE 2" DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH 3634

PRES. MAX 2500# MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS.

DISPLACEMENT _____

OWNER Samie

CEMENT

AMOUNT ORDERED 225 sks com
(used 75 sks)

COMMON	<u>75 sks</u>	@	<u>6.35</u>	<u>476.25</u>
POZMIX		@		
GEL		@		
CHLORIDE		@		
	<u>Cemad 20#</u>	@	<u>4.45</u>	<u>89.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>225 sks</u>	@	<u>1.05</u>	<u>236.25</u>
MILEAGE	<u>44 pm sk/mile</u>			<u>315.00</u>
TOTAL				<u>1,116.50</u>

EQUIPMENT

PUMP TRUCK CEMENTER Walt

191 HELPER Dean

BULK TRUCK

218 DRIVER Louise

BULK TRUCK

_____ DRIVER _____

REMARKS:

Test casing From 3634' to Surface
2 300# Held
Took injection rate down Tubing 2 BPM
21000#, mix 50 sks com, w Cemad
25 sks Tail, displace 13 1/2 BBL Squeeze
to 2500#, clear tubing, ok squeeze 2
2500#
thru

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 675.00

EXTRA FOOTAGE @ _____

MILEAGE 35 miles @ 3.00 105.00

PLUG @ _____

@ _____

@ _____

TOTAL 780.00

CHARGE TO: Charter Energy

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

@ _____

@ _____

@ _____

@ _____

@ _____

TOTAL _____

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.

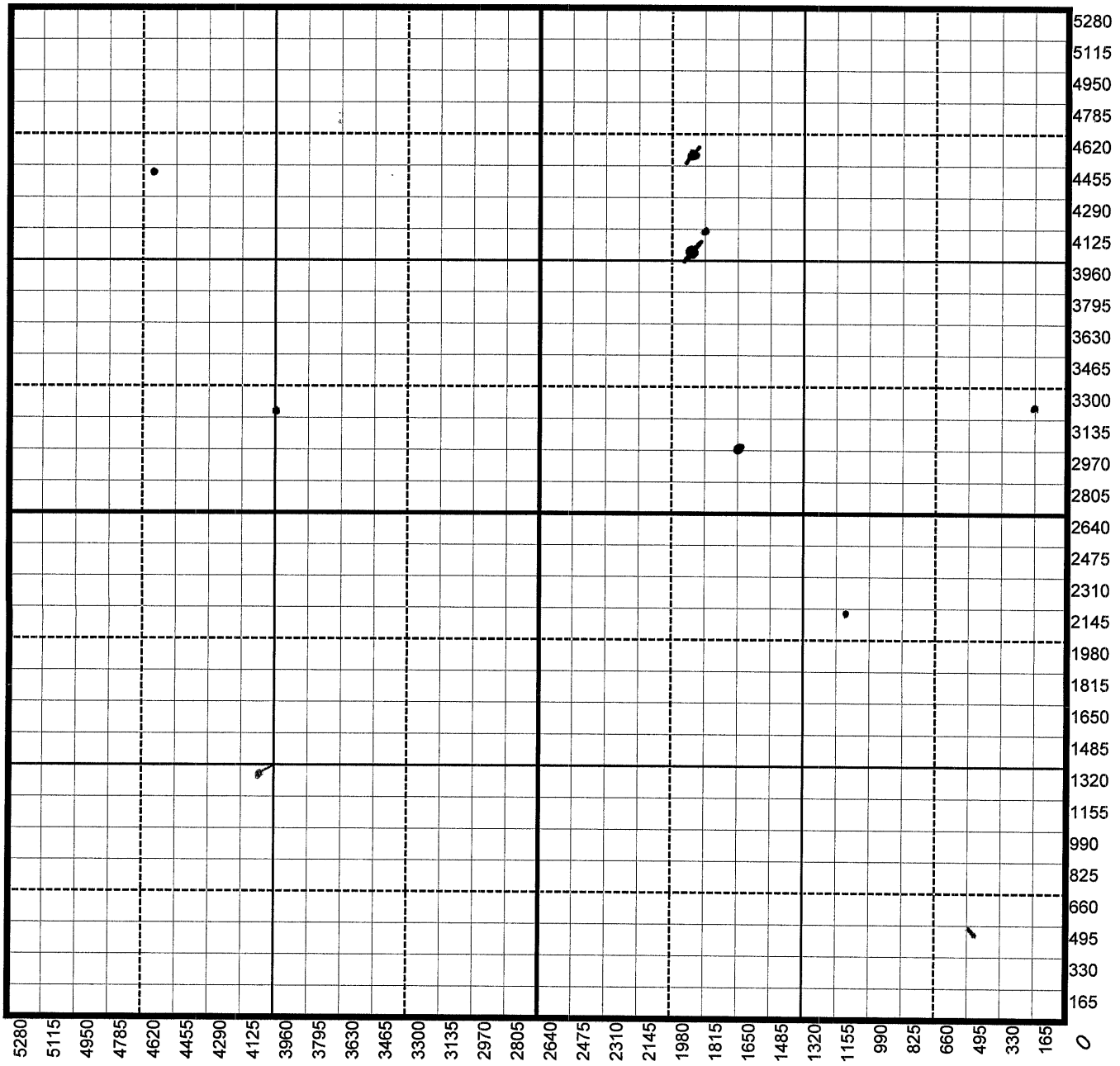
SIGNATURE [Signature]

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____



KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

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Phone: (316) 793-9090
Contractor: Name: DOC'S WELL SERVICE
License: N/A 32030 ✓
Wellsite Geologist: NONE

Designate Type of Completion:
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 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: GLENN W. PEEL

Well Name: COOK #3
Original Comp. Date: 3-11-55 Original Total Depth: 3679
 Deepening Re-perf. Conv. to SWD
 Plug Back Plug Back Total Depth
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 Dual Completion Docket No. _____
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8-9-2000 8-28-2000 8-31-2000
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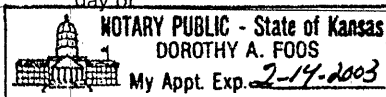
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Signature: [Signature]
Title: PRESIDENT Date: SEPT. 2, 2000

Subscribed and sworn to before me this _____ day of _____
2000.



Notary Public: Dorothy A. Foos
Date Commission Expires: 2-14-2003

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: RECEIVED
STATE CORPORATION COMMISSION
 Wireline Log Received
 Geologist Report Received SEP 6 2000
 UIC Distribution
CONSERVATION DIVISION
Wichita, Kansas

Operator Name: CHARTER ENERGY, INC. Lease Name: COOK Well #: 3
 Sec. 2 Twp. 11 S. R. 21 East West County: TREGO

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 (Attach Additional Sheets) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 (Submit Copy) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <u>OLD LOG ALREADY SUBMITTED</u> <u>ARBUCKLE</u> <u>3664</u> <u>-1575</u>
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CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used							
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	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)		

TUBING RECORD	Size <u>2 1/2" PLASTIC LINED @ 3651 / 3651</u>	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <u>WHEN APPROVED</u>		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>VAC.</u>		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval: _____

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 STATE CORPORATION COMMISSION
 SEP 05 2000
 CONSERVATION DIVISION
 Wichita, Kansas
 OCT 6 2000