

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

CONFIDENTIAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 33264
Name: Central Production Co. Inc.
Address: 718 Oak Street
City/State/Zip: Humboldt, KS 66748
Purchaser: _____

API No. 15 - 099-23283.00.00
County: Labette
NW SE NE Sec. 10 Twp. 35 S. R. 21 East West
1716 feet from S (N) (circle one) Line of Section
1122 feet from (E) W (circle one) Line of Section

Operator Contact Person: Gilbert McGowan
Phone: (620) 473-2411
Contractor: Name: David Casey
License: 33274
Wellsite Geologist: Eric Arro

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Barr Well #: C3
Field Name: Chetopa
Producing Formation: _____

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

Elevation: Ground: 837.5' Kelly Bushing: _____
Total Depth: 155' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at NA Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____

If Alternate II completion, cement circulated from 155
feet depth to 0 w/ 15 sx cmt.
Act II WHM 7-19-02

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. _____

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: _____

7/22/03 7/23/03 7/24/03
Spud Date or Date Reached TD Completion Date or Recompletion Date
Recompletion Date

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: geologist Date: 8/4/03
Subscribed and sworn to before me this 4 day of August, 2004
Notary Public: Anjelica S. Hanson
Date Commission Expires: 10/22/05

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

ANJELICA S. HANSON
NOTARIAL SEAL - STATE OF IOWA
COMMISSION NUMBER 719188
MY COMMISSION EXPIRES: 10/22/05

X

Operator Name: Central Production Co. Inc Lease Name: Barr Well #: C3
 Sec. 10 Twp. 35 S. R. 21 East West County: Labette

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)
 List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Bartlesville 94'

**RELEASED
 FROM
 CONFIDENTIAL**

CASING RECORD <input 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	# Sacjs Used	Type and Percent Additives

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	155'	Type I, II	15	Portland

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SWD or Enhr. Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil Bbls. Gas Mcf Water Bols. Gas-Oil Ratio Gravity

Disposition of Gas **METHOD OF COMPLETION** Production Interval
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACC-18.) Other (Specify)