

RECEIVED

SEP 26 2001

KCC WICHITA

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 # 32384
 Name: Comanche Resources Company
 Address: 9520 N. May, Ste. 370
 City / State / Zip: Oklahoma City, OK 73120
 Purchaser: _____
 Operator Contact Person: Rachel Laubaugh
 Phone: 755-5900 x44
 Contractor: Name: Duke Drilling Co., Inc.
 License: 5929
 Wellsite Geologist: Padgett Mud Loggers
 Designate Type of Completion _____
 New Well Re-Entry Workover
 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: _____
 Well Name: _____
 Original Comp. Date: _____ Original Total Depth _____
 Deepening Re- _____ Conv. To Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

5/11/01	5/21/01	6/14/01
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15- 033-21208 - 00 - 00
 County: Comanche County, Kansas
 _____ - _____ - CNE Sec. 7 Twp. 31 S. R. 19 East West
1320' feet from S (N) (circle one) Line of Section
1320' feet from (E) / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) (NE) SE NW SW
 Lease Name: Lohrding Unit Well #: 2
 Field Name: Arlie
 Producing Formation: Spergen Mississippi
 Elevation: Ground: 2095' Kelly Bushing: 2100'
 Total Depth: 5227' Plug Back Total Depth: _____
 Amount of Surface Pipe set and Cementat at 667' 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.
ALT I WTM 7-18-06

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: _____

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

Signature: Rachel Laubaugh
 Title: Production Assistant Date: 9-24-01
 Subscribed and sworn to before me this 24 day of September
2001
 Notary Public: Gaura S. L. ...
 Date Commission Expires: 11-6-03

KCC Office Use ONLY

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

✓

X

Operator Name: Comanche Resources Co., LLC Lease Name: Lohrding Unit Well # 2
 Sec. 7 Twp. 31 S. 19 R. East West County: Comanche County, Kansas

INSTRUCTIONS: Show how important tops and base formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressures 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 <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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List all E. Logs Run: Micro, Neutron Density, Array Induction	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">Name</td> <td style="width:15%;">Top</td> <td style="width:15%;">Datum</td> </tr> <tr> <td>Brown Lime</td> <td style="text-align: right;">4324</td> <td style="text-align: right;">-2224</td> </tr> <tr> <td>Lansing</td> <td style="text-align: right;">4350</td> <td style="text-align: right;">-2250</td> </tr> <tr> <td>Cherokee</td> <td style="text-align: right;">4920</td> <td style="text-align: right;">-2820</td> </tr> <tr> <td>Mississippian</td> <td style="text-align: right;">5004</td> <td style="text-align: right;">-2904</td> </tr> <tr> <td>Warsaw Dolomite</td> <td style="text-align: right;">5130</td> <td style="text-align: right;">-3030</td> </tr> </table>	Name	Top	Datum	Brown Lime	4324	-2224	Lansing	4350	-2250	Cherokee	4920	-2820	Mississippian	5004	-2904	Warsaw Dolomite	5130	-3030
Name	Top	Datum																	
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Warsaw Dolomite	5130	-3030																	

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used <small>Report all strings set-conductor, surface, intermediate, production, etc.</small>							
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
Conductor		20"	73#	70'			
Surface	12 1/4"	8 5/8"	24#	667'	35/35 Poz	250	6% gel, 3% cc
Production		4 1/2"	11.6#	5232'	Class H ASC	275	5% Kolsel, 5% FL10

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth	Type and Cement	#Sacks Used	Type and Percent Additives
	Top Bottom			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type <small>Specify Footage of Each Interval Perforated</small>	Acid, Fracture, Shot, Cement Squeeze Record <small>(Amount and Kind of Material Used)</small>	Depth
4	5034'-42	1000 Gals 15% NEFE	

TUBING RECORD Size 2 3/8" Set At 4963' Packer At 4963'	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
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Date of First, Resumed Production, SWD or Enhr.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Shut in Gas Well	
Estimated Production Per 24 Hours	Oil Bbls. Gas Mcf. Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented (If vented, Submit ACO-18.) <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Commingled _____

ALLIED CEMENTING CO., INC.

8018

Federal Tax I.D. XXXXXXXXXX

PO BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

ORIGINAL

Medicine Lodge

DATE <u>5-11-01</u>	SEC. <u>7</u>	TWP. <u>31S</u>	RANGE <u>19W</u>	CALLED OUT <u>2:00 pm</u>	ON LOCATION <u>4:45 pm</u>	JOB START <u>8:20 pm</u>	JOB FINISH <u>9:00 pm</u>
LEASE <u>to Hiding</u>	WELL # <u>2</u>	LOCATION <u>Coldwater KS. 5N, 4W,</u>			COUNTY <u>Coma</u>		
OLD OR NEW (Circle one) <u>NEW</u>		<u>2N, W/into</u>					

CONTRACTOR Abercrombie

TYPE OF JOB surface

HOLE SIZE 12 1/4 T.D. 669'

CASING SIZE 8 5/8 DEPTH 667'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 900 MINIMUM -

MEAS. LINE _____ SHOE JOINT 44.

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 4 1/2 Bbl Freshwater

EQUIPMENT

OWNER Comanche Res

CEMENT

AMOUNT ORDERED

250 sx 65:35:6 + 27cc + _____ (lead)

100 sx CLASS A + 27cc _____ (tail)

COMMON <u>A</u>	<u>100</u>	@ <u>6.65</u>	<u>665.00</u>
POZMIX _____		@ _____	_____
GEL _____		@ _____	_____
CHLORIDE <u>8</u>		@ <u>30.00</u>	<u>240.00</u>
<u>AKW</u>	<u>250</u>	@ <u>6.30</u>	<u>1575.00</u>
<u>FLO-SEAL</u>	<u>63#</u>	@ <u>1.40</u>	<u>88.20</u>
_____		@ _____	_____
_____		@ _____	_____
HANDLING <u>371</u>		@ <u>1.10</u>	<u>408.10</u>
MILEAGE <u>371 x 45</u>		@ <u>.04</u>	<u>667.80</u>

PUMP TRUCK CEMENTER Carl Balding

265 HELPER Mike Rucker

BULK TRUCK

353 DRIVER Jason Tritt

BULK TRUCK

_____ DRIVER _____

RECEIVED

TOTAL 3644.10

REMARKS:

Pipe on bottom break circulation,
Pump 5 Bbls Freshwater, 250 sx lead
Cement + 100 sx tail cement, stop pumps
+ Release plug. Displace with 4 1/2 Bbls
Freshwater, Bump plug + Float Held.

SEP 26 2001 SERVICE

KCC WICHITA

DEPTH OF JOB 667'

PUMP TRUCK CHARGE 0-300' 530.00

EXTRA FOOTAGE 337' @ .50 168.50

MILEAGE 45 @ 3.00 135.00

PLUG Rubber 8 5/8" @ 100.00 100.00

_____ @ _____ _____

_____ @ _____ _____

TOTAL 923.50

CHARGE TO: Comanche Resources

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>1- Reg Guide shoe</u>	@ <u>215.00</u>	<u>215.00</u>
<u>1- AFU Insert</u>	@ <u>325.00</u>	<u>325.00</u>
<u>3- centralizers</u>	@ <u>55.00</u>	<u>165.00</u>
<u>1- Thread Lock Kit</u>	@ <u>30.00</u>	<u>30.00</u>
_____	@ _____	_____

TOTAL 735.00

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 5302.60

DISCOUNT 530.26 IF PAID IN 30 DAYS

4771.89

SIGNATURE [Signature]

DENNIS DYE
PRINTED NAME

ALLIED CEMENTING CO., INC.
PO BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566

ORIGINAL

INVOICE

Invoice Number: 084316

Invoice Date: 05/22/01

Sold Comanche Resources
To: 9520 N. May Ave.
ST #370
Oklahoma City, OK

Cust I.D.....: Coma
P.O. Number...: Lohrding #2
P.O. Date.....: 05/22/01

Date: 06/21/01

Qty	Description	Used	Unit	Price	Total	
	Common	15.00				
	pozmix	10.00				
	Gel	1.00				
	ASC "H"	275.00 SK				
	KolSeal	1375.00				
	FL-10	129.00				
	Mud Clean "C"	500.00				
	Mud Clean	500.00				
	Handling	379.00				
	Mileage (45)	45.00				
41/8	379 sks @ \$0.04 per sk per mi					
	Production	1.00				
	Mileage pmp trk	45.00				
	TRP	1.00				
	Guide Shoe	1.00				
	AFU Float Collar	1.00				
	Centralizers	12.00				
	Stop Ring	1.00				
	Thread Lock	1.00				
	SKS	6.6500		99.75		E
	SKS	3.5500		35.50		E
	SKS	10.0000		10.00		E
	SKS	10.0500		2763.75		E
	LBS	0.5000		687.50		E
	LBS	8.0000		1032.00		E
	GAL	1.0000		500.00		E
	GAL	0.7500		375.00		E
	SKS	1.1000		416.90		E
	MILE	15.1600		682.20		E
	JOB	1340.0000		1340.00		E
	MILE	3.0000		135.00		E
	EACH	48.0000		48.00		E
	EACH	125.0000		125.00		E
	EACH	245.0000		245.00		E
	EACH	45.0000		540.00		E
	EACH	20.0000		20.00		E
	EACH	30.0000		30.00		E
	Subtotal:				9085.60	
	Tax.....:				0.00	
	Payments:				0.00	
	Total....:				9085.60	

9-20-01
Rachel
2 Pages

908.56

Sylvia

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SEP 26 2001
KCC WICHITA