

ORIGINAL

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

SIDE ONE

OPERATOR: License # 5363
Name: BEREXCO INC.
Address: 100 N. Broadway
Suite 970
City/State/Zip: Wichita, KS 67202
Purchaser: _____
Operator Contact Person: Gary Misak
Phone: (316) 265-3311
Contractor: Berexco Inc.
License: 5363
Wellsite Geologist: _____

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover/Re-Entry; oil well info as follows:

Operator: Twin Drilling Co.

Well Name: Goetz #2
Comp. Date: 6/25/36 Old Total Depth: 3560'

Deepening Re-Perf Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. E-27,189

Spud Date _____ Date Reached TD _____ Completion Date 6/05/97

API NO. 15- Drilled 7-11-36 15-051-06796-0001

County Ellis
- NE - SW - SE Sec 3 Twp 14S Rge 17 ^E ^W

990 Feet from (S)N (circle one) Line of Section

1650 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 Goetz A Well # 2

Field Name Toulon

Producing Formation Arbuckle

Elevation: Ground: _____ KB 2003 est.

Total Depth 3560' PBTB 3560'

Amount of Surface Pipe Set and Cemented at 3504 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1115 Feet

If Alternate II completion, cement circulated from 1115

Feet depth to Surface w/ 930 sx. cmt.

ACT II WDM 7-12-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride Content _____ ppm Fluid Volume _____ bbls

Dewatering method used RECEIVED

Location of fluid disposal if hauled offsite:
STATE CORPORATION COMMISSION

Operator Name MAY 4 2000

Lease Name _____

Quarter _____ Se _____ Twp Wichita, Kansas E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas, 67202; within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-2-130, 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 with all plugged well. 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 Gary Misak

Title District Production Engineer Date 3/15/99

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

Notary Public _____

Date Commission Expires _____

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)

SIDE TWO

Operator Name BEREXCO INC.
 Sec 3 T 14S Rge 17 East West

Lease Name Goetz A Well # 2
 County Ellis

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 pressure, whether shut-in pressure reached static level, hydrostatic pressure, 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:

<input type="checkbox"/> Log	Formation (Top, Depth and Datum)	<input checked="" type="checkbox"/> Sample
Name	Top	Datum
LKC	3278'	(-1275)
Arbuckle	3514'	(-1511)
TD	3560'	(-1557)

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	# Sacks Used	Type and Percent Additives
		7"		3504'		60	
				225'-1115		930	
Production		5 1/2"		3499'	Pozmix	400	10%gal

Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone Remedial	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			

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)	
Open hole	3504-60		2000gals 15% NeFe	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	3434'	3434'	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj		Producing Method			
8/22/97		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimate Production Per 24 Hours	Oil	Bbbls	Gas	MCF	Water Bbbls
					240
				Gas-Oil Ratio	Gravity

METHOD OF COMPLETION

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

Open Hole Perf Dually Comp Commingled
 Other (Specify) _____ 3504-60

Production Interval