

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

RECEIVED
MAR 17 2003
KCC WICHITA

API NO. 15- _____
County Wilson
SE - SE - SW - NE Sec. 18 Twp. 30 Rge. 16 E W
2475 Feet from S/W (circle one) Line of Section

Operator: License # 6374
Name: Bailey Oil Co Inc
Address Box 446
City/State/Zip Neodesha, Ks. 66757

1400 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 Fee 1 Well # Hill # 11

Purchaser: Crude Marketing
Operator Contact Person: LaDonna Bailey
Phone (620) 325 2635
Contractor: Name: LWS Well Service

Field Name Neodesha
Producing Formation Bartlesville
Elevation: Ground 800 KB _____
Total Depth 973 PBTD _____

License: 32450
Wellsite Geologist: Colt Natural Gas LLC
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Amount of Surface Pipe Set and Cemented at 20.6 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 0
feet depth to 970 w/ 160 sx cmt.

If Workover/Reentry: Old Well Info as follows:
Operator: NA
Well Name: _____
Comp. Date _____ Old Total Depth _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
10-29-02 10-31-02 02-5-03
Spud Date Date Reached TD Completion Date

Drilling Fluid Management Plan AL II EIH 3-18-03
(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 Rng. E/W
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 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 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 3-14-03
Subscribed and sworn to before me this 14 day of March 2003.
Notary Public Patricia B Bailey
Date Commission Expires 02/09/2007

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)

PATRICIA B. BAILEY
Notary Public - State of Kansas
My Appt Expires

Operator Name BaileyOilCo. Inc. Lease Name FREE T Well # Hill#11
 Sec. 18 Twp. 30Rge-16 East West
 County Wilson

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

Log Formation (Top), Depth and Datums Sample
 Name Top Datum
 Bartlesville (Cheokee) 877 896

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
surface	11 1/4	7"	20	20.6	Portland	7	
Production	6 1/4	2 7/8	10	970	OWL	160	flo sea

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 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
1	878-893	50 gal ncl	894

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	1	872		

Date of First, Resumed Production, SWD or Inj. 2-5-03 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	1/4		3/4		36

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) 878-893 Production Interval