Form ACO-1 September 1999 Form Must Be Typed

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGHT

| Operator: License #30717 | API No. 15 - 163-23, 373-00-00 |
|---|---|
| Name: DOWNING-NELSON OIL CO., INC. | County: Rooks |
| Address: P.O. Box 372 | NW _SW_SW _ Sec. 19 Twp. 6 S. R. 19W [East X West |
| City/State/Zip: Hays, KS 67601 | 990 feet from S / (P (circle one) Line of Section |
| Purchaser: | 330 feet from 6 / ((circle one) Line of Section |
| Operator Contact Person: Ron Nelson | Footages Calculated from Nearest Outside Section Corner: |
| Phone: (.785) .628–3449 | (circle one) NE SE NW SW |
| Contractor: Name: Discovery Drilling Co., Inc. | Lease Name: Buss Well #: 1-19 |
| License: 31548 RECEIVED | Field Name: McClurg West |
| Welleite Geologist: Ron Nelson | Producing Formation: None |
| Designate Type of Completion: SEP 1 1 2003 | Elevation: Ground: 2093 Kelly Bushing: 2101 |
| X New Well Re-Entry W@@WICHITA | Total Depth: 3610 Plug Back Total Depth: |
| OilSWDSIOWTemp. Abd. | Amount of Surface Pipe Set and Cemented at 223.57 Feet |
| Gas ENHR SIGW | Multiple Stage Cementing Collar Used? |
| X Dry Other (Core, WSW, Expl., Cathodic, etc) | If yes, show depth setFeet |
| If Workover/Re-entry: Old Well Info as follows: | If Alternate II completion, cement circulated from |
| Operator: | feet depth to sx cmt. ACTIF PEA WHM 9-27 06 sx cmt. |
| Well Name: | Drilling Fluid Management Plan |
| Original Comp. Date:Original Total Depth: | (Data must be collected from the Reserve Pit) |
| Deepening Re-perf Conv. to Enhr./SWD | Chloride content 500 ppm Fluid volume 320 bbls |
| Plug Back Plug Back Total Depth | Dewatering method used Evaporation |
| Commingled Docket No. | Location of fluid disposal if hauled offsite: |
| Dual Completion Docket No | |
| Other (SWD or Enhr.?) Docket No | Operator Name: |
| 5/6/03 5/10/03 5/11/03 | Lease Name: License No.: |
| Spud Date or Date Reached TD Completion Date or | Quarter Sec Twp S. R East West |
| Recompletion Date Recompletion Date | County: Docket No.: |
| | |
| Kansas 67202, within 120 days of the spud date, recompletion, workown information of side two of this form will be held confidential for a period of 107 for confidentiality in excess of 12 months). One copy of all wireline logs TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells | |
| All requirements of the statutes, rules and regulations promulgated to regulaterin are complete and correct to the best of my knowledge. | ate the oil and gas industry have been fully complied with and the statements |
| Signature: Ron nelson | |
| Title: President Date: Sept. 10, 20 | DO.3 Letter of Confidentiality Attached |
| Subscribed and sworn to before me this 10th day of September | If Denied, Yes Date: Wireline Log Received |
| 19 X 2003 | |
| Notary Public: JessicaR, BalgaDD Date Commission Expires: Le-17-06 | UIC Distribution |
| Date Commission Expires: (e-17-06 | |

NOTARY PUBLIC - State of Kensas
JESSICA R. BASGALL
My Appt. Exp. (0-17-016



2

| perator Name:DOWNec19Twp6 | Samuel In | OIL | , INC. | Lease County | | Buss Rooks | | Well #;1 | _19 |
|---|---|------------------------------|---|--|--|-----------------------------|---|--|--|
| ISTRUCTIONS: Show isted, time tool open an imperature, fluid recove lectric Wireline Logs su | nd closed, flowing a ery, and flow rates i | and shut-in if gas to sur | pressures, v face test, ak | vhether sh ong with fi | ut-in pre | ssure reached : | static level, hydros | itatic pressure | es, bottom hole |
| Drill Stem Tests Taken X Yes No | | | | | ☑Log Formation (Top), | | on (Top), Depth ar | nd Datum | Sample |
| (Attach Additional Sheets) Samples Sent to Geological Survey Yes K No Cores Taken Yes K No Electric Log Run K Yes No (Submit Copy) List All E. Logs Run: Dual Induction, Density- Neutron, Micro, Sonic | | | y- | Anh Top Hee Tor LKC BKC | | | Top 706 122 313 bsent 330 520 552 bsent | Datum +398 -1018 -1209 -1226 -1416 -1448 | |
| | | | was a second of the second of | | Gra | nite Was | | 574 | -1470 |
| | | Benort a | CASING | | X Ne orface, inte | w Used ermediate, produc | tion, etc. | | |
| Purpose of String | Size Hole Drilled | lole Size Casi | | Wei Lbs. | ght | Setting Depth | Type of Cement | # Sacks Used | Type and Percent Additives |
| Surface Pipe | rface Pipe $12\frac{1}{4}$ 8 5 | | 5/8 2 | | O . | 223,57 | Common . | 155 | 2%Ge1&3%CC |
| | | | ADDITIONAL | CEMENTI | NG / SQI | JEEZE RECORI | <u> </u> | | |
| Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone | Depth Top Bottom | Type of Cement | | #Sacks | | | Type and Percent Additives | | |
| 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 | | | | |
| | | | | | | | | | |
| TUBING RECORD | Size | Set At | MARKANITET VIIII MARKANITET KAMPANI | Packer | At | Liner Run | Yes No | | |
| Date of First, Resumed P | roduction, SWD or Er | nhr. F | Producing Met | hod | Flowin | ng []Pum | olng [_]Gas Li | n []Ou | ner <i>(Explain)</i> |
| Estimated Production Per 24 Hours | Oil | Bbls. | Gas | Mcf | Wa | ter | Bbls. | Gas-Oil Ratio | Gravity |
| Disposition of Gas | METHOD OF C | OMPLETION | V Open Hole | Pe | 1. [] | Production Int | erval | | |
| Vented Sold (If vented, Sun | LJ | [| Other (Spe | L.,,,,,1 | | | [] | The second of th | a produce annual constraint in the Constraint constrain |

ALLIED CEMENTING CO., INC. 11419 Federal Tax I.D.#

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

ORYGHNALD

| | SEC. | TWP. | RANGE | CALLED OUT | ON LOCATION | IOB STATA | IOD EINIGA | | |
|---|--|---|--|---|--|---|--|--|--|
| DATE 5/10/03 | Julie. | 1 111, | KANGE | CALLED OUT | 5130pm | | 1 730 Pm | | |
| LEASE Bass | WELL# | 1-19 | LOCATION Stock | Hon 10w to | Rd 9 | GOUNTY SOOKS | STATE K.5 | | |
| OLD OR (NEW) (Ci | rcle one) | | 1 | U 2WY2N | | | | | |
| CONTRACTOR | D | 0 | | | | | â ⁿ , | | |
| CONTRACTOR TYPE OF JOB | Surfac | ery v | ing 7 | OWNER | | | | | |
| | 14 | | . 234 | CEMENT | | | S. 7 | | |
| | 35/8 | | PTH 233 | | DERED | 5 COM 3 | 901L | | |
| TUBING SIZE | | DE | РТН | | | | golsei | | |
| DRILL PIPE | · · · · · · · · · · · · · · · · · · · | <u>DE</u> | PTH | The Mark State of the State of | | | | | |
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| CEMENT LEFT IN | J CSG | 20 ~ | OE JOINT | _ POZMIX GEL | 3 | @ | 3000 | | |
| PERFS. | 1000. | <i></i> | | GEL _ CHLORIDE _ | | _@_30æ | | | |
| DISPLACEMENT | 1. | 34 Bb | | _ CHEOKIDE _ | | | <u> </u> | | |
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| PUMP TRUCK | CEMENT | ER D | اسا | | | @ | · · | | |
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| BULK TRUCK | | | | - HANDLING | 155 | _ @ <u></u> | | | |
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| BULK TRUCK | | | अपूर्णक के हा कार्यर | RECEI | VED | , , | 17607 | | |
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ALLIED CEMENTING CO., INC. 14764 Federal Tax I.D.#

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

SEMPLE SANAL

| DATE 5-11-03 | SEC. | TWP. | RANGE | CALLED OUT | ON LOCATION | JOB START | JOB FINISH |
|--|--------------|---|--|---|---|---------------------------------------|--|
| LEASE BUSS | WELL# | 1-10 | LOCATION ST | | , | COUNTY | STATE |
| OLD OR NEW (C | | 1-14 | LOCATION 50 16 | OCTON 10W | | Rooks | KS |
| | | | | | 1/24 | J , | |
| CONTRACTOR | 1750 | VERY | | OWNER | | | 1 · · · · · · · · · · · · · · · · · · · |
| TYPE OF JOB | PTA | | | | | | 1, 1, 2, 2, 1, |
| HOLE SIZE | 7% | T.D | . 3610 | CEMENT | | | CALCANY, |
| CASING SIZE | | DE | PTH | _ AMOUNT OR | DERED ZD | 560/HA 10 | 7-151 |
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| DRILL PIPE | 4/2 | | PTH 1725 | | | /3583 [1 | DEAL |
| TOOL | - | | PTH (| name . | , | | A |
| PRES. MAX | | | NIMUM | _ COMMON | 120 | _@ <u>745</u> _ | _858 |
| MEAS. LINE CEMENT LEFT I | N CCC | SHO | DE JOINT | POZMIX | 82 | _@ 38 | 304 € |
| PERFS. | N CSG. | 8 | | _ GEL | 70 | _@_ <u></u> 0 | _100°c |
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| PUMP TRUCK | CEMENTE | ER_MA | RK | | | _@ | |
| # 345 | HELPER | | DAVE | - IIANDI ING | ^ | _@ | |
| BULK TRUCK | | | Δ | HANDLING_ MILEAGE | 54 K | <u> </u> | <u>230°</u> |
| # 362 | DRIVER | | SLEN | MILEAGE | | sk /mile | _438 |
| BULK TRUCK | DDIII | | | RECEIVED | ı | • | 11 11/4/20 |
| # 32 | DRIVER | | Nides, tism | | | TOTAL | 1992 |
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| To Allied Cemen | ting Co., Ir | ic. | | Participant of Control State April 1997 and the State of Control State of | | @ | Sign may |
| You are hereby re | equested to | rent cem | enting equipment | | • | | WELLING. |
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