

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5952

Name: BP AMERICA PRODUCTION COMPANY

Address P. O. BOX 3092, WL1-RM 3.201

City/State/Zip HOUSTON, TX 77253-3092

Purchaser: _____

Operator Contact Person: SUE SELLERS

Phone (281) 366-2052

Contractor: Name: CHEYENNE DRILLING

License: 5382

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc.)

If Workover/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____

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. _____

11/6/03 11-08-03 02/28/04

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API NO. 15- 093-21734-0000

County KEARNY

NW - NW - SE - SW Sec. 14 Twp. 23 S. R. 36 E W

1250' FSL Feet from S/N (circle one) Line of Section

1400' FWL Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name KLEEMAN GU 'C' Well # 3

Field Name PANOMA

Producing Formation COUNCIL GROVE

Elevation: Ground 3138' Kelley Bushing 3145'

Total Depth 3004' Plug Back Total Depth 3004'

Amount of Surface Pipe Set and Cemented at _____ 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.

Drilling Fluid Management Plan ALT I WFM 10-2-06
(Data must be collected from the Reserve Pit)

Chloride content 35000 MG/L ppm Fluid volume 800 bbls

Dewatering method used DRIED AND FILLED

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ 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.

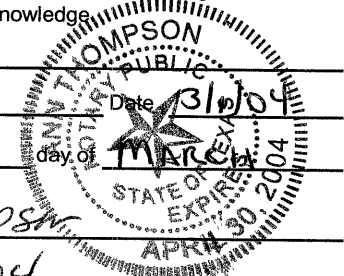
Signature Sue Sellers

Title REGULATORY STAFF ASSISTANT

Subscribed and sworn to before me this 1ST day of MARCH, 2004.

Notary Public Ann Thompson

Date Commission Expires 4-30-04



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

✓

X

Operator Name BP AMERICA PRODUCTION COMPANY

Lease Name KLEEMAN GU 'C' Well # 3

Sec. 14 Twp. 23S S.R. 36 East West

County KEARNY

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 all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CHASE	2544'	KB
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	COUNCIL GROVE	2808'	KB
List All E.Logs Run: COMPENSATED SPECTRAL NATURAL GAMMA				

CASING RECORD <input checked="" 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	# Sacks Used	Type and Percent Additives
SURFACE	12 1/4"	8 5/8"	24#	912'	LP3/'C'	285	2%CC;1/4#FLOC
					LP3/'C'	125	2%CC;1/4#FLOC
PRODUCTION	7 7/8"	4 1/2"	10.5#	3004'	LP3/'C'	640	1/4# FLOCELE

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
4	2834' - 2854'	FRAC - W/150,000# 16/30 BRADY SAND	2834-2854
		& 400 BBLs. OF 70Q N2 FOAM	
		ACID - 500 GALS. OF 15% HCL	2834-2854

TUBING RECORD	Size 2 3/8"	Set At 2869'	Packer At NA	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
02/29/04	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
0		90	0	

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled

(If vented, submit ACO-18.) Other (Specify) _____

HALLIBURTON JOB SUMMARY

SALES ORDER NUMBER 2761292	TICKET DATE 11/07/03
BDA / STATE MC/Ks	COUNTY KEARNY
PSL DEPARTMENT Cement	CUSTOMER REP / PHONE DAN KISER 805-886-6166
SAP BOMB NUMBER 7521	Cement Surface Casing
HES FACILITY (CLOSEST TO WELL SITE) Liberal Ks.	

REGION Central Operations	NWA / COUNTRY Mid Continent/USA
MBU ID / EMPL # MCLIO103 106304	H.E.S. EMPLOYEE NAME TYCE DAVIS
LOCATION LIBERAL	COMPANY BP AMERICA
TICKET AMOUNT \$7,587.17	WELL TYPE 02 Gas
WELL LOCATION LAND N. LAKIN	DEPARTMENT CEMENT
LEASE NAME KLEEMAN "GU"	SEC / TWP / RNG 14 - 23S - 36W

ORIGINAL

RECEIVED
MAR 03 2004
KCS WICHITA

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HR	HR	HR	HR
Davis, T 106304	8.0			
Wille D. 226409	8.0			
Ferguson, R 106154	8.0			
Slater J 106095	8.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10219237	190			
10244148-10286731	63			
10240236-10240245	63			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	11/6/2003	11/7/2003	11/7/2003	11/7/2003
Time	2300	0300	0900	1030

Type and Size	Qty	Make
Float Collar		COMP
Float Shoe		COMP
Centralizers S-4	4	HOWCO
Top Plug 5W	1	HOWCO
HEAD PC	1	HOWCO
Limit clamp		
Weld-A	1	HOWCO
Guide Shoe TIGER TOOTH	1	HOWCO
BTM PLUG		

	New/Used	Weight	Size Grade	From	To	Max. Allow
Casing	NEW	24#	8 5/8"	0	912	
Liner						
Liner						
Tubing						
Drill Pipe						
Open Hole			12 1/4"			Shots/Ft.
Perforations						
Perforations						
Perforations						

Materials	Density	Lb/Gal
Mud Type		
Disp. Fluid		
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Hours On Location	Operating Hours	Description of Job		
Date	Hours	Date	Hours	
11/7				Cement Surface Casing
Total		Total		

Ordered	Hydraulic Horsepower Avail.	Used
Treating	Average Rates in BRM Disp.	Overall
Feet 45	Cement Left in Pipe Reason	SHOE JOINT

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	285	HLC PP		3% CC - 1/4# FLOCELE	11.45	2.07	12.30
2	125	PREM PLUS		2% CC - 1/4# FLOCELE	6.30	1.34	14.80
3							
4							

Summary			
Circulating Breakdown	Displacement	Preflush: BBI	Type:
Lost Returns	MAXIMUM	Load & Bkdn: Gal - BBI	Pad:Bbl -Gal
Cmt Rtrn#Bbl	Lost Returns-f	Excess /Return BBI	Calc.Disp Bbl
Average	Actual TOC	Calc. TOC:	Actual Disp:
Shut In: Instant	Frac. Gradient	Treatment: Gal - BBI	Disp:Bbl
	5 Min. 15 Min	Cement Slurry BBI	
		Total Volume BBI	
			135.0
			190.00

Frac Ring #1 | Frac Ring #2 | Frac Ring #3 | Frac Ring #4

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____
 SIGNATURE _____

HALLIBURTON JOB SUMMARY

REGION Central Operations		NWA / COUNTRY Mid Continent/USA		SALES ORDER NUMBER 2763104	TICKET DATE 11/08/03
MBU ID / EMPL # MCL10101 106322		H.E.S. EMPLOYEE NAME Danny McLane		BDA / STATE MC/Ks	COUNTY KEARNY
LOCATION LIBERAL		COMPANY BP AMERICA		ORIGINAL	
TICKET AMOUNT \$8,765.47		WELL TYPE 02 Gas			
WELL LOCATION N/Lakin, Ks		DEPARTMENT Cement		CUSTOMER REP / PHONE DAN KISER 806-886-6166	
LEASE NAME KLEEMAN "GU"		Well No. C#3	SEC / TWP / RNG 14 - 23S - 36W	API/AMI # 093-21734-0000	
		KCC WICHITA		SAP BOMB NUMBER 7523	
				WELL FACILITY (CLOSEST TO WELL SITE) Liberal Ks	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
McLane, D 106322	4.0			
Lemieux, M 266575	4.0			
Tate, N 105953	2.5			
Nichols, J 288309	2.5			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547695	190			
10251401	190			
10010748 10011278	63			
10011406 10011591	63			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	11/8/2003	11/8/2003	11/8/2003	11/8/2003
Time	0900	1200	1430	1600

Tools and Accessories

Type and Size	Qty	Make
IFS Shoe 4 1/2	1	Howco
Float Shoe		
Centralizers 4 1/2	6	Howco
Top Plug 4 1/2	1	Howco
HEAD 4 1/2	1	Howco
Limit clamp 4 1/2	1	Howco
Weld-A	1	Howco
Guide Shoe		
BTM PLUG		

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	New	10.5#	4 1/2"		0	3,004	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8"				Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

Mud Type	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
11/8	4.0	11/8	1.0	Cement Production Casing
Total	4.0	Total	1.0	

Ordered _____ Hydraulic Horsepower Avail. _____ Used _____
 Treating _____ Average Rates in BPM Disp. _____ Overall _____
 Feet **1** Cement Left in Pipe Reason **SHOE JOINT**

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	640	HLC PP	Bulk	1/4# FLOCELE	11.41	2.04	12.27
2							
3							
4							

Summary

Circulating Breakdown	Displacement	Preflush:	BBI	5.00	Type:	fresh water
Lost Returns-y	MAXIMUM	Load & Bkdn:	Gal - BBI		Pad:Bbl -Gal	
Cmt Rtrn#Bbl	Actual TOC	Excess /Return	BBI		Calc.Disp Bbl	47.8
Average	Frac. Gradient	Treatment:	Gal - BBI		Actual Disp.	48
Shut In: Instant	5 Min.	Cement Slurry	BBI	232.5	Disp:Bbl	
	15 Min.	Total Volume	BBI	285.50		

Frac Ring #1 _____ **Frac Ring #2** _____ **Frac Ring #3** _____ **Frac Ring #4** _____

THE INFORMATION STATED HEREIN IS CORRECT

CUSTOMER REPRESENTATIVE _____

 SIGNATURE

