

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

JUN 21 2006

KCC WICHITA

Operator: License # W 3988
Name: Slawson Exploration Co., Inc.

Address: 204 N Robinson, Ste 2300
Oklahoma City, OK 73102

City/State/Zip: _____

Purchaser: Oneok
Steve Slawson

Operator Contact Person: _____

Phone: (405) 232 0201

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

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:
Slawson Exploration Co., Inc.

Operator: _____

Well Name: WEISENBERGER K #1

Original Comp. Date: 11/12/03 Original Total Depth: 4601

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back 2780' Plug Back Total Depth _____

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Enhr.?) Docket No. _____

3/30/06

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

ORIGINAL

API No. 15 - 171 20580 ~~00-00~~

County: Scott

SE. NW. SW. SE Sec. 10 Twp. 18S S. R. 31 East West
990

2305 feet from (S) / N (circle one) Line of Section

2305 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: WEISENBERGER K Well #: 1

Field Name: _____

Producing Formation: KRIDER

Elevation: Ground: 2931 Kelly Bushing: _____

Total Depth: 4601 Plug Back Total Depth: 2780

Amount of Surface Pipe Set and Cemented at 359 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2810 Feet

If Alternate II completion, cement circulated from 2810
surf 535 feet depth to _____ w/ _____ sx cmt.

ALT II WHM 9-7-06

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, 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 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.

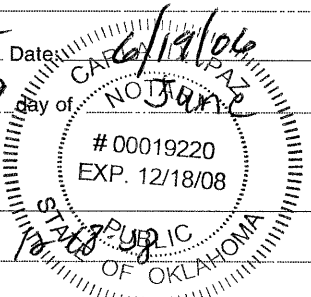
Signature: _____

Title: Operations Manager Date: 6/19/06

Subscribed and sworn to before me this 19 day of JUNE, 2006

Notary Public: Earl P. P.

Date Commission Expires: _____



KCC Office Use ONLY

NO Letter of Confidentiality Received

If Denied, Yes Date: _____

NO Wireline Log Received

NO Geologist Report Received

NO UIC Distribution

Operator Name: Slawson Exploration Co., Inc. Lease Name: Weisenberger K Well #: 1
 Sec. 10 Twp. 18 S. R. 31 East West County: Scott

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 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 <i>(Attach Additional Sheets)</i> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--	---

CASING RECORD <input 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	23#	359	Common	225	3% CC, 2% Gel
Production	7-7/8	4-1/2	10.5#	4555	EA-2	200	5% CalSeal, 10% Salt
				DV 2810'	CI 'H'	385	10% salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate	900'	SMD	150	
<input type="checkbox"/> Protect Casing		CI 'H'	150	3% CC
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
4	Perf Krider 2734-2746'	1500 gal 15% HCL w/additives, flush w/12 BBLs	2% KCLW
	CIBP @ 2780'	8 squeeze holes @ 2792'-93'	
	CIBP @ 4140'		

TUBING RECORD		Size 2-3/8	Set At 2767	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 5/19/06			Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil 0 Bbls.	Gas 60 Mcf	Water 5 Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

METHOD OF COMPLETION Other (Specify) _____

Production Interval _____