

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 30604
Name: Raydon Exploration, Inc.
Address: 9400 N. Broadway, Ste. 400
City/State/Zip: Oklahoma City, OK 73114
Purchaser: _____
Operator Contact Person: David E. Rice
Phone: (620) 624-0156
Contractor: Name: Big A Drilling
License: 31572
Wellsite Geologist: Ed Grieves

CONFIDENTIAL

RECEIVED

DEC 22 2003

KCC WICHITA

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:

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. _____

<u>11-13-03</u>	<u>11-29-03</u>	<u>11-30-03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 119-211220000
County: Meade
C NE NW Sec. 06 Twp. 33 S. R. 30 East West
330 feet from S N (circle one) Line of Section
2022 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Gladden Farms Well #: 1-6
Field Name: Stevens West

Producing Formation: _____
Elevation: Ground: 2761' Kelly Bushing: 2772'
Total Depth: 6200' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 1657' 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.
ALT IWHM 10-2-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 7000 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.: _____

RELEASED FROM CONFIDENTIAL

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: David E Rice
Title: Agent for Raydon Date: 12-18-03
Subscribed and sworn to before me this 18th day of December,
~~19~~ 2003
Notary Public: [Signature]
Date Commission Expires: _____

NOTARY PUBLIC, State of Kansas
Seward County
HELEN M. SMITH
My Appt. Exp. 2-5-2005

KCC Office Use ONLY

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

✓

X

Operator Name: Raydon Exploration, Inc. Lease Name: Gladden Farms Well #: 1-6
 Sec. 06 Twp. 33 S. R. 30 East West County: Meade

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Spectral Density Dual Spaced Neutron II Log High Resolution Induction Log Microlog	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Base Heebner 4357 Lansing 4476 Cherokee 5279 Chester 5640 St. Louis 5964
--	--

RECEIVED
DEC 22 2003
KCC WICHITA

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#	1657'	Midcon C	405	3%cc, 1/2# floce
					Premium Plu	150	2%cc, 1/4# floce

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 <i>(Amount and Kind of Material Used)</i>		Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled _____
 Other *(Specify)* _____

Production Interval

HALLIBURTON JOB SUMMARY

SALES ORDER NUMBER **2770593** TICKET DATE **11/13/03**

REGION
Central Operations

MBU ID / EMPL #
MCLI0110 / 198516

LOCATION
LIBERAL

TICKET AMOUNT
\$10,254.38

WELL LOCATION
KISMET

LEASE NAME
GLADDEN FARMS

NWA / COUNTRY
Mid Continent/USA

H.E.S. EMPLOYEE NAME
Jason Clemens

COMPANY
RAYDON EXPLORATION

WELL TYPE
01 Oil

DEPARTMENT
ZI

SEC / TWP / RNG
6 - 33S - 30W

BDA / STATE
MC/Ks

COUNTY
MEADE

PSL DEPARTMENT
Cement

CUSTOMER REP / PHONE
DAVID RICE

API/UWI #

SAP BOMB NUMBER
7521

Cement Surface Casing

HES FACILITY (CLOSEST TO WELL SITE)
Liberal, Ks

RECEIVED
DEC 22 2003

KCC WICHITA
RELEASED

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198516	6.0			
Cochran, M 217398	6.0			
Howard, A 285427	5.0			
Slater, J 106095	5.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547690	40			
10251403	40			
10243558-10011277	20			
10010752-10011272	20			

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
11/13/2003	0530	0930	1305	1430

Tools and Accessories

Type and Size	Qty	Make
Float Collar		H
Float Shoe		O
Centralizers	4	W
Top Plug	1	C
HEAD	1	H O
Limit clamp	1	O
Weid-A	1	W
Guide Shoe	1	C
steel vane	1	O

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	N	24#	8 5/8		0	1,657	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			12 1/4				
Perforations							Shots/Ft.
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		

Hours On Location

Date	Hours
11/13	5.0
Total	5.0

Operating Hours

Date	Hours
11/13	2.0
Total	2.0

Description of Job
Cement Surface Casing

Ordered _____ Hydraulic Horsepower Avail. _____ Used _____

Treating _____ Average Rates in BPM Disp. _____ Overall _____

Feet - 45 Cement Left in Pipe Reason _____ SHOE JOINT

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	405	MIDCON PP C		3% CC - 1/2# FLOCELE	17.92	2.92	11.40
2	150	PREM PLUS C		2% CC - 1/4# FLOCELE	6.30	1.34	14.80
3							
4							

Summary

Circulating Breakdown _____	Displacement _____	Preflush: BBI _____	Type: _____
Lost Returns-Y _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad:Bbl -Gal _____
Cmt Rtm#Bbl _____	Lost Returns-N _____	Excess /Return BBI _____	Calc.Disp Bbl _____
Average _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. 103
Shut In: Instant _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp:Bbl _____
	5 Min. _____	Cement Slurry BBI _____	247.0
	15 Min. _____	Total Volume BBI _____	#VALUE!

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

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____
 Signature: *William Z Smith*
 SIGNATURE

HALLIBURTON JOB SUMMARY

SALES ORDER NUMBER 2799706	TICKET DATE 11/30/03
BDA / STATE MC/OK	COUNTY MEADE
PSL DEPARTMENT Cement	CUSTOMER REP / PHONE 3 DAVID RICE
API/UVI #	SAP BOMB NUMBER 7528
HES FACILITY (CLOSEST TO WELL SITE) Liberal, Ks	

REGION Central Operations	NWA / COUNTRY Mid Continent/USA
MBU ID / EMPL # MCLI0110 / 198516	H.E.S EMPLOYEE NAME Jason Clemens
LOCATION LIBERAL	COMPANY RAYDON EXPLORATION
TICKET AMOUNT \$5,326.62	WELL TYPE 01 Oil
WELL LOCATION KISMET	DEPARTMENT ZI
LEASE NAME GLADDEN FARMS	Well No. 1-6
	SEC / TWP / RNG 6 - 33S - 30W

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198516	4.0			
Cochran, M 217398	4.0			
Arnett, J 226567	4.0			
Slater, J 106095	4.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547690	40			
10251403	40			
10010748/10011278	20			

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

Tools and Accessories

Type and Size	Qty	Make
Float Collar		H
Float Shoe		O
Centralizers		W
Top Plug		C
HEAD		H O
Limit clamp		O
Weld-A		W
Guide Shoe		C
BTM PLUG		O

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	
Perpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

RECEIVED
DEC 22 2003
KCC WICHITA
RELEASED
FROM

Date	Location	Job Started	Job Completed
11/30/2003	11/30/2003	11/30/2003	11/30/2003

Well Data

New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing				0		
Liner						
Liner						
Tubing		4 1/2			1,675	
Drill Pipe						
Open Hole		7 7/8				
Perforations						Shots/Ft.
Perforations						
Perforations						

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
11/30	3.0	11/30	2.0	Plug to Abandon
Total	3.0	Total	2.0	

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

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	50	40/60 POZ H		6% TOTAL GEL (PLUG AT 1675 FT)	7.59	1.53	13.50
2	40	40/60 POZ H		6% TOTAL GEL (PLUG AT 600 FT)	7.59	1.53	13.50
3	10	40/60 POZ H		6% TOTAL GEL (PLUG AT 40 FT)	7.59	1.53	13.50
4	15	40/60 POZ H		6% TOTAL GEL (PLUG RAT HOLE)	7.59	1.53	13.50

Summary

Circulating Breakdown	Displacement	Preflush: BBI	Type:
Lost Returns-Y	MAXIMUM	Load & Bkdn: Gal - BBI	Pad:Bbl -Gal
Cmt Rtrn#Bbl	Lost Returns-N	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.	Cement Slurry BBI	
	15 Min.	Total Volume BBI	
			31.0
			31.00

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

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____

 SIGNATURE