

ORIGINAL

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

Operator: License # 32971
Name: Dominion Oklahoma Texas E&P, Inc.
Address: Suite 600
14000 Quail Springs Parkway
City/State/Zip Oklahoma City, OK 73134

Purchaser: _____
Operator Contact Person: Christine Beleele

Phone (405) 749-5297

Contractor: Name NA

License: _____

Wellsite Geologist: NA

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:
Operator: Dominion Oklahoma Texas E&P, Inc.

Well Name: Blout 1-5

Comp. Date 10/20/03 Old Total Depth 5100'

Deepening Re-perf. Conv. To Inj/SWD
 Plug Back PBSD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

10-20-03 2/19/02 10-20-03
2/10/02 3/01/02
Spud Date Date Reached TD Completion Date

API NO. 15 - 129-21662-00-01
County Morton
N2 - N2 - SW Sec. 5 Twp. 33S Rge. 42 E

990' 2310 Feet from S / N (circle one) Line of Section
2588' 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 Blout Well # 1-5

Field Name Mustang East

Producing Formation U. Morrow

Elevation: Ground 3530' KB 3541'

Total Depth 5100' PBSD 4646'

Amount of Surface Pipe Set and Cemented at 1386' 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
(Data must be collected from the Reserve Pit) *See 1 well*

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 CD-4 form with all plugged wells. Submit CP-111 with all temporarily abandoned wells.

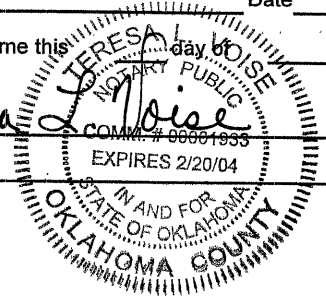
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully compiled with and the statements herein are complete and correct to the best of my knowledge.

Signature Christine Beleele
Title Regulatory Specialist Date 11/18/03

Subscribed and sworn to before me this _____ day of _____ 20____.

Notary Public Serena L. Noice

Date Commission Expires _____



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)

Operator Name Dominion Oklahoma Teks E&P, Inc.

Lease Name Blout Well # 1-5

Sec. 5 Twp. 33 Rge. 42 East

County Morton

West

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 Log Formation (Top), Depth and Datum Sample (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No Name Top Datum

Cores Taken Yes No

Electric Log Run Yes No (Submit Copy.)

List All E.Logs Run:

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"	23#	1386'	HCl	525	3% cc & 1/8# Flocele
Production	7-7/8"	5-1/2"	15.5#	4835'	Poz	190	3% gel & 3% KCL
					Cl "H"	140	Flocele

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Materials Used) Depth
6	Additional perfs to existing U. Morrow 4630-42' CIBP @ 4646'	
4	4636-44'; 4648-54'	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	4623'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.		Producing Method			
10/20/03		<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
	16		0		20 Gas-Oil Ratio 41.3°

Disposition of Gas: Vented Sold Used on Lease (If Vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: Other (Specify) _____