

ORIGINAL

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

Operator: License # 32198
Name: PETROSANTANDER (USA) INC
Address: 6363 WOODWAY suite 350
City: HOUSTON
State/Zip: TEXAS 77057
Purchaser: NA
Operator Contact: Thomas W Nelson
Phone: (713) 784-8700
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

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API NO. 15- 055-20663 -00-01
County FINNEY
- S/2 - SW - SE Sec. 2 Twp. 23S Rge. 31 X E
330 Feet from S/N (circle one) Line of Section
1980 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 CARR Well # CARR 2-1
Field Name STEWART
Producing Formation MORROW
Elevation: Ground 2883' KB 2888'
Total Depth 4866' PBTD 4847'
Amount of Surface Pipe Set and Cemented at 470' Feet
Multiple Stage Cementing Collar Used? X Yes _____ No
If yes, show depth set 2108' Feet
If Alternate II completion, cement circulated from 2108'
feet depth to surface w/ 450 sx cmt.

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW Plugged
 Dry WSW Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: _____
Operator: PETROSANTANDER (USA) INC
Well Name: CARR 2-1
Comp. Date 05/30/86 Old Total Depth 4566'
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. E-27138
04/12/06 04/12/06 04/12/06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Disilling Fluid Management Plan ALT II WITH 10-9-06
(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 Rng. _____ E/W
County _____ Docket No. _____

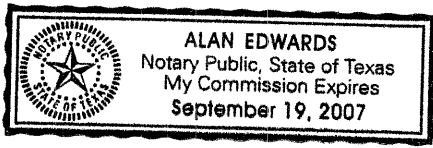
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INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 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 Tom Nelson
Title Vice President, Operations Date 4/26/06
Subscribed and sworn to before me this 24th day of April,
20 06.
Notary Public Alan Edwards
Date Commission Expires 9/19/07

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)



SIDE TWO

Operator Name PETROSANTANDER (USA) INC Lease Name CARR Well # CARR 2-1

Sec. 2 Twp. 23S Rge. 31
 East
 West

County FINNEY

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 (Attach Additional Sheets.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 (Submit Copy.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No List ALL E Logs run (See attached letter)	<input type="checkbox"/> Log Formation (Top), Depth and Datums <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD							
<input type="checkbox"/> New <input type="checkbox"/> Used <input checked="" type="checkbox"/> Existing 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	existing	8-5/8" existing	24#	470'	Common	275	3% cc
PRODUCTION	existing	5-1/2" existing	14#	4865'	Pozmix 50/50	150	

ADDITIONAL CEMENTING/SQUEEZE RECORD					NONE
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

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	4756' - 4786'		

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TUBING RECORD: Size <u>2-3/8"</u> Set At <u>4728'</u> Packer At <u>4726'</u>	Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Date of First, Resumed Production, SWD or Inj. Awaiting Temp Injection Authorization	Producing Method. <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) INJECTION.
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, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) INJECTION

Production Interval