

RECEIVED

KANSAS CORPORATION COMMISSION

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

JAN 17 2002

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

CONSERVATION DIVISION
#32483

Operator: License # _____
Name: ONSHORE LLC
Address: 200 E First ste 301
City/State/Zip: Wichita, KS 67202
Purchaser: (pioneer) (Barr Energy)
Operator Contact Person: John Kelley
Phone: (316) 262-3413
Contractor: Name: Pickrell Drilling
License: #5123
Wellsite Geologist: Timothy G Pierce

API No. 15 - 077-21409-0000
County: Harper County, KS
N/2 SW NE Sec. 30 Twp. 31 S. R. 8W East West
1615' feet from S (N) (circle one) Line of Section
1910' feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Washbon Well #: 3
Field Name: Spivey-Grabs
Producing Formation: MISS
Elevation: Ground: 1584' Kelly Bushing: 1589'
Total Depth: 4499' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 252' (8-5/8) 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 I WHM 10-13-06

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. _____

8-22-01 8-30-01 12-14-01
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: [Signature] John M Kelley

Title: owner/operator Date: 1/15/02

Subscribed and sworn to before me this 16th day of January

20 02
Notary Public: [Signature]
PHYLIS E. BREWER, Notary

Date Commission Expires: July 21, 2003

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PHYLIS E. BREWER
Notary Public - State of Kansas
My Appt. Expires 7-21-03

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

X

Operator Name: ONSHORE LLC Lease Name: Washbon Well #: #3
 Sec. 30 Twp. 31 S. R. 8W East West County: Harper

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 (Attach Additional Sheets) 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input checked="" type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>MISS</td> <td>4374"</td> <td>(-2785)</td> </tr> </table> | <input type="checkbox"/> Log | Formation (Top), Depth and Datum | <input checked="" type="checkbox"/> Sample | Name | Top | Datum | MISS | 4374" | (-2785) |
| <input type="checkbox"/> Log | Formation (Top), Depth and Datum | <input checked="" type="checkbox"/> Sample | | | | | | | | |
| Name | Top | Datum | | | | | | | | |
| MISS | 4374" | (-2785) | | | | | | | | |

| 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# | 252' | 60/40 POZ | 185 | 2%gel, 3%CC |
| production | 7-7/8" | 5-1/2" | 15.5# | 4498' | class A | 150 | 10%salt 5#/sk Gilsonite |

| 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) | |
|----------------|---|--|-------|
| | | Amount | Depth |
| 2 spf | 4373'-4393' | Acid(1000 gal 10% FE, 32,600 gal Vis 25# with 3,000 #100 mesh sand, 14,500 #20-40 sand, 19,500 #12-20 sand and 6,000 #12-20 AC Frac epoxy coated sand down tubing) | Ultra |

| | | | | |
|----------------------|-------------------|-----------------------|-----------------------|---|
| TUBING RECORD | Size <u>2-7/8</u> | Set At <u>4365.44</u> | Packer At <u>none</u> | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|----------------------|-------------------|-----------------------|-----------------------|---|

| | |
|--|---|
| Date of First, Resumed Production, SWD or Enhr. <u>12-18-01 resumed</u> | 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 Bbls. <u>unknown</u> | Gas Mcf <u>unknown</u> | Water SW <u>0</u> | Bbls. <u>0</u> | Gas-Oil Ratio | Gravity |
|-----------------------------------|--------------------------|------------------------|-------------------|----------------|---------------|---------|

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

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify)



INVOICE NO.
Date 8-30-01
Customer ID

Subject to Correction
Lease Washbon
County Harper

FIELD ORDER

03904

Well # 3
Legal 30-31s-8w
State KS
Pratt KS

CHARGE

Onshore LLC
Depth TP-4520
Formation 13.5ppf
Shoe Joint 4d.
Casing 5 1/2
Casing Depth 4497
TD 4498
Job Type Log String New Well
Customer Representative Dave Pauley
Treater D. Scott

AFE Number PO Number Materials Received by X *[Signature]*

| Product Code | QUANTITY | MATERIAL, EQUIPMENT and SERVICES USED | UNIT PRICE | AMOUNT | ACCOUNTING | |
|----------------------------|----------|---------------------------------------|------------|--------|------------|--------|
| | | | | | CORRECTION | AMOUNT |
| D100 | 150 ski | Premium Cmt 'H' | ✓ | | | |
| D202 | 25 ski | 60/40 por Cmt | ✓ | | | |
| C322 | 750 lbs | Gilsonite | ✓ | | | |
| C223 | 739 lbs | Salt Fine | ✓ | | | |
| C196 | 71 lbs | FLA-322 | ✓ | | | |
| C243 | 14 lbs | DeFoamer | ✓ | | | |
| C302 | 500 gal | mud flush | ✓ | | | |
| C223 | 500 lbs | Salt flush | | | | |
| F101 | 9 ca | Centralizer's 3 1/2 in | ✓ | | | |
| F151 | 1 ca | L.D. Plug & Baffle 1" | ✓ | | | |
| F181 | 1 ca | Float Shoe 1" | ✓ | | | |
| F251 | 10 ca | Recip. Cable Scratchers 1" | ✓ | | | |
| E107 | 175 ski | Cmt Serv Charge | | | | |
| E100 | 1 ca | UNITS / way MILES 50 | | | | |
| E104 | 407 tm | TONS / way MILES 50 | | | | |
| R209 | 1 ca | EA. 4001-4500' PUMP CHARGE | | | | |
| Discounted Price = 5563.44 | | | | | | |
| Plus Tax | | | | | | |

COPY

RECEIVED
STATE CORPORATION COMMISSION
JAN 27 2002
CONSERVATION DIVISION
Wichita, Kansas

JAN 22 2002



CONSERVATION DIVISION
Wichita, Kansas

| | |
|-----------------------------|-------------------------|
| Customer ID | Date |
| Customer <i>Dashore LLC</i> | <i>8-30-01</i> |
| Lease <i>Washbon</i> | Lease No. |
| | Well # <i>3</i> |
| Field Order # <i>03904</i> | Station <i>Pratt KS</i> |
| Casing <i>5 1/2</i> | Depth <i>4497</i> |
| County <i>Harper</i> | State <i>KS</i> |

Type Job *Long string New well* Formation _____ Legal Description *30-31s-8w*

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|--------------------------|-------------------|------------------|----|-----------------------------------|------------|------------------|-------------------|------------------|
| Casing Size <i>5 1/2</i> | Tubing Size | Shots/Ft | | Acid <i>130 skt H</i> | | RATE | PRESS <i>2500</i> | ISIP |
| Depth <i>4454</i> | Depth <i>PBTD</i> | From | To | Pre Pad <i>10% Salt 3 1/2 gal</i> | Max | | | 5 Min. |
| Volume <i>106.4</i> | Volume | From | To | Pad <i>13FLA 1.41 14.8 pp</i> | Min | | | 10 Min. |
| Max Press | Max Press | From | To | Exac <i>25 skt 60/40 poz</i> | Avg | | | 15 Min. |
| Well Connection | Annulus Vol. | From | To | <i>20 Bbl's Salt 12 m.f.</i> | HHP Used | | | Annulus Pressure |
| Plug Depth | Packer Depth | From | To | Flush | Gas Volume | | | Total Load |

Customer Representative *Dave Pauley* Station Manager *Dave Autry* Treater *D. Scott*

Service Units *106 35 57 30 72 1*

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|-------------|-----------------|-----------------|--------------|------------|--|
| <i>2200</i> | | | | | <i>On Loc w/Trks Safety mtg F.S. & Baffle S.J. Pent 1-3-5-7-9-11-13-15-17 Scratcher's Top S.J. 2 & 3. Bottom 416 Psg on Bottom Drop Ball Circ w/ Rig</i> |
| <i>0437</i> | <i>400</i> | | <i>20</i> | <i>6</i> | <i>St Salt flush</i> |
| <i>0445</i> | <i>400</i> | | <i>12</i> | <i>6</i> | <i>St mud flush</i> |
| <i>0456</i> | <i>400</i> | | <i>5</i> | <i>6</i> | <i>H2O Spacer</i> |
| <i>0452</i> | <i>450</i> | | <i>37.5</i> | <i>5.0</i> | <i>Mix & Pump Cmt @ 14.8 pp 150 skt</i> |
| <i>0503</i> | <i>0</i> | | <i>10</i> | <i>5</i> | <i>Chose In & Wash Pump & line</i> |
| <i>0507</i> | <i>100</i> | | | <i>7.5</i> | <i>Release Plug & St Disp w/ H2O</i> |
| <i>0519</i> | <i>500</i> | | <i>80</i> | <i>7.0</i> | <i>Lifting Cmt</i> |
| <i>0528</i> | <i>1500</i> | | <i>106.4</i> | <i>0</i> | <i>Plug Downsp, Test Psg</i> |
| <i>0530</i> | <i>0</i> | | | | <i>Release Hold</i> |
| | | | | | <i>Recip Psg Dan'ing Job & Good Circ</i> |
| | | | | | <i>Plug R.H. w/ 60/40 poz Cmt</i> |
| | | | | | <i>Job Complete</i> |
| | | | | | <i>Thank you</i> |
| | | | | | <i>Scotty</i> |

ALLIED CEMENTING CO., INC.

8358

ORIGINAL

RECEIVED
Federal Tax I.D.#
STATE CORPORATION COMMISSION

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

JAN 22 2002

SERVICE POINT:

Med Lodge

| | | | | | | | | |
|-------------------------|----------|--------------------------------|----------|--|------------------------|----------------------|-------------------|--------------------|
| DATE 8-21-01 | SEC 30 | TWP. 31S | RANGE 8W | CONSERVATION DIVISION Atchita, Kansas | CALLED OUT 6:00 pm. | ON LOCATION 10:30 | JOB START 2:30 | JOB FINISH 2:45 |
| LEASE Washbon | WELL # 3 | LOCATION Mag Plant 35-1/2W-5/5 | | | COUNTY HARPER | STATE KS | | |
| OLD OR NEW (Circle one) | | | | | | | | |

CONTRACTOR Pickrell Drlg. Co.

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 257

CASING SIZE 8 5/8 DEPTH 252.25

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15.00

PERFS. _____

DISPLACEMENT 15 1/2 bbls. Fresh H₂O

EQUIPMENT

PUMP TRUCK CEMENTER Shane Winsor

343 HELPER Mark Brungardt

BULK TRUCK

240 DRIVER ERIC Holmes

BULK TRUCK

_____ DRIVER _____

OWNER Onshore LLC.

CEMENT

AMOUNT ORDERED 185 cu 60:40:39cc. 2% Gel

| | | | | |
|----------|-----------------|---|--------------|----------------|
| COMMON | <u>A 111</u> | @ | <u>6.65</u> | <u>738.15</u> |
| POZMIX | <u>74</u> | @ | <u>3.55</u> | <u>262.70</u> |
| GEL | <u>3</u> | @ | <u>10.00</u> | <u>30.00</u> |
| CHLORIDE | <u>6</u> | @ | <u>30.00</u> | <u>180.00</u> |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| | | @ | | |
| HANDLING | <u>194</u> | @ | <u>1.10</u> | <u>213.40</u> |
| MILEAGE | <u>194 x 25</u> | | <u>.04</u> | <u>194.00</u> |
| TOTAL | | | | <u>1618.25</u> |

REMARKS:

On location Rig up - Get pipe on bottom
break circ. - Pump 5 bbl H₂O spacer - start
cement of 41 1/2 bbl slurry - Release Plug
start Displ. of 15 1/2 bbl. Shut in plug down
at 2:45 circ. 2 bbl to pit.

SERVICE

DEPTH OF JOB 252.25

PUMP TRUCK CHARGE _____ 520.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 25 @ 3.00 75.00

PLUG WOODEN 3 7/8" @ 45.00 45.00

TOTAL 640.00

CHARGE TO: Pickrell Drlg. Co.

STREET P.O. Box 1303

CITY GREAT BEND STATE KANSAS ZIP 67530

COPY

FLOAT EQUIPMENT

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment
and furnish cementer and helper to assist owner or
contractor to do work as is listed. The above work was
done to satisfaction and supervision of owner agent or
contractor. I have read & understand the "TERMS AND
CONDITIONS" listed on the reverse side.

SIGNATURE Mike Kern

TAX _____

TOTAL CHARGE 1962.90

DISCOUNT 196.20 IF PAID IN 30 DAYS

1766.69

Mike Kern

PRINTED NAME