

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

IS-05510002-00-03

Operator: License # 5317
Name: Russell Freeman d/b/a Continental Energy
Address: P.O. Box 918
City/State/Zip: Garden City, KS 67846
Purchaser: Unimark
Operator Contact Person: Russell Freeman
Phone: (620) 276-8710
Contractor: Name: Border-Line Well Service
License: 7840
Wellsite Geologist: None

API No. 15-~~855-01,001~~
County: Finney
SE SE NE Sec. 29 Twp. 22 S. R. 33 East West
2310 feet from S / (N) (circle one) Line of Section
330 feet from (E) / W (circle one) Line of Section

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Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Collins Well #: 1
Field Name: Damme
Producing Formation: Council Grove
Elevation: Ground: 2895' Kelly Bushing: 2900'
Total Depth: 3000' Plug Back Total Depth: 2965'
Amount of Surface Pipe Set and Cemented at 396' 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.

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: Russell Freeman d/b/a Continental Energy
Well Name: Collins #1
Original Comp. Date: 04/10/90 Original Total Depth: 3000'
1-10-90 Re-perf. Conv. to Enhr./SWD
2965' Plug Back 2965' Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

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.: _____

3-16-04 Spud Date or Recompletion Date
04/01/04 Date Reached TD
04/01/04 Completion Date or Recompletion Date
KCC WITHM-1
OPER

ACT II WITHM w/ 11-30-06

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: Russell Freeman
Title: OWNER Date: 7-8-04
Subscribed and sworn to before me this 8 day of July
20 04
Notary Public: Karen Bogner
Date Commission Expires: 10/11/04

KCC Office Use ONLY

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

NOTARY PUBLIC - State of Kansas
KAREN BOGNER
My Appt. Exp. _____

Operator Name: Russell Freeman d/b/a Continental Energy Lease Name: Collins Well #: 1
 Sec. 29 Twp. 22 S. R. 33 East West County: Finney

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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Herrington</td> <td>2500</td> <td>+400</td> </tr> <tr> <td>Krider</td> <td>2530</td> <td>+370</td> </tr> <tr> <td>Winfield</td> <td>2571</td> <td>+329</td> </tr> <tr> <td>Fort Riley</td> <td>2616</td> <td>+284</td> </tr> <tr> <td>Wreford</td> <td>2802</td> <td>+98</td> </tr> <tr> <td>Council Grove</td> <td>2814</td> <td>+86</td> </tr> </table>	Name	Top	Datum	Herrington	2500	+400	Krider	2530	+370	Winfield	2571	+329	Fort Riley	2616	+284	Wreford	2802	+98	Council Grove	2814	+86
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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	10 1/4"	8 5/8"	23	396'	common	400	
Production	7 7/8"	4 1/2"	10.5	3000'	pre. plus	175	
					HLC	230	

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 checked="" type="checkbox"/> Plug Off Zone	600'	common/poz mix	150	60/40 1% CC
	2792'			

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
4	2850'-2856'	2000 gallons 15% HCL	
4	2840'-2846'		

TUBING RECORD		Size 2 3/8"	Set At 2896'	Packer At none	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method <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
		30	30		

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) _____

Phone 316-483-2627, Russell, Kansas

Phone Plainville 913-434-2812

Phone 316-793-5861, Great Bend, Kansas

Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC.

4873

Home Office P. O. Box 31

Russell, Kansas 67665

Oil

Date	10-6-03	Sec.	29	Twp.	22	Range	33	Called Out	2 PM	On Location	5 PM	Job Start	5:25	Finish	6:15	
Lease	Collins	Well No.	1	Location				Garden City 9N 4W 1/2 NW	County	Finner	State	Ks				

Contractor		NA	
Type Job		Casing Squeeze	
Hole Size	Csg.	T.D.	Depth
4 1/2"	10.5		3000'
Tbg. Size		Depth	
Drill Pipe		Depth	
Tool		Depth	
Cement Left in Csg.		Shoe Joint	
Press Max.	1000#	Minimum	
Meas Line		Displace	

Owner Same
 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 listed.

Charge To	Continental Energy
Street	Box 918
City	Garden City State Ko. 67846

The above was done to satisfaction and supervision of owner agent or contractor.
 Purchase Order No.
 X-100-1000-1000-1000

Perf. 2840-46 2850-56

EQUIPMENT

No.	Cementer	Gary
Pumptrk 158	Helper	Mike
No.	Cementer	
Pumptrk	Helper	
	Driver	Bill
Bulktrk 116	Driver	

CEMENT
 Amount Ordered 150 6% 1% CC

Consisting of			
Common	90	5.75	517.50
Poz. Mix	60	3.00	180.00
Gel.	1	25.00	25.00
Chloride			
Quickset			

DEPTH of Job 2856'

Reference:	Pump Truck	980.00
70	Mileage	157.50
	4 1/2" TWP	25.00
	Sub Total	
	Total	1162.50

Handling	150	1.00	150.00
Mileage	70		420.00
		Sub Total	
		Total	1292.50

Remarks: Mix pump 150 x amt. Displace
 13 1/2 bbl. 1000#. Staging shut in
 1000#
 1st by check

Floating Equipment
 Total 2455.00
 Disc 491.00
 1964.00
 TAX 120.30

*Thank you
 Gary L. Heron*

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Paid