

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

**ORIGINAL**

**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

**CONFIDENTIAL**

Operator: License # 32977  
 Name: Dorado Gas Resources LLC  
 Address: 14550 East Easter Ave., Ste 1000  
 City/State/Zip: Centennial, CO 80112  
 Purchaser: Quest Petroleum  
 Operator Contact Person: Steven A. Tedesco  
 Phone: ( 303 ) 617-8919  
 Contractor: Name: McGowan Drilling  
 License: 5786  
 Wellsite Geologist: Chris Ryan  
 Designate Type of Completion:  
 \_\_\_\_\_ New Well \_\_\_\_\_ Re-Entry \_\_\_\_\_  
 \_\_\_\_\_ 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>04/23/04</u>                   | <u>04/29/04</u> | <u>08/6/04</u>                          |
| Spud Date or<br>Recompletion Date | Date Reached TD | Completion Date or<br>Recompletion Date |

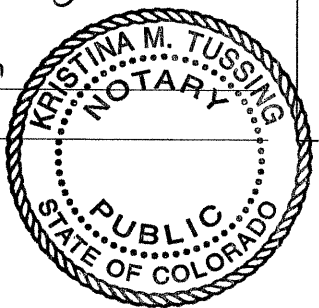
API No. 15 - 133-26048 - 0000  
 County: Neosho  
 \_\_\_\_\_ Nw. Ne Sec 211 Twp. 27 S. R. 17  East  West  
660 662 feet from S N (circle one) Line of Section  
1980 1736 feet from E W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW SW  
 Lease Name: Quinn Well #: 2-11  
 Field Name: Humbolt-Chanuate  
 Producing Formation: Bartlesville  
 Elevation: Ground: 963 Kelly Bushing: \_\_\_\_\_  
 Total Depth: 1124 Plug Back Total Depth: \_\_\_\_\_  
 Amount of Surface Pipe Set and Cemented at 20 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)  
 Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
 Dewatering method used air dry  
 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]  
 Title: Manager of Geology Date: August 8, 2004  
 Subscribed and sworn to before me this 8th day of August  
20 04  
 Notary Public: [Signature]  
 Date Commission Expires: 5-22-08



**RELEASED**  
 KCC Office Use ONLY  
 Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Dorado Gas Resources LLC Lease Name: Quinn Well #: 2-11  
 Sec. 2 Twp. 27 S. R. 17  East  West County: Neosho

**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<br><i>(Attach Additional Sheets)</i><br><br>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br><br>Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br><i>(Submit Copy)</i><br><br>List All E. Logs Run:<br><br><b>Dual Induction</b><br><b>Dual Compensated Porosity Log</b> | <input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample<br>Name Top Datum<br><b>Cherokee</b> 664 299<br><b>Mississippian</b> 1076 -113<br><br>See mud log for cores and sample descriptions |
|---|--|

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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 Casing  | 12 1/4"           | 10"                       | 20                | 20'           | Portland       | 5            | None                       |
| Production  | 6 3/4"            | 4 1/2"                    | 9.5               | 1123'         | Portland       | 158          | 2% Gel, 3/4 Flo            |

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| ADDITIONAL CEMENTING / SQUEEZE RECORD  |                  |                |             |                            |
|--|------------------|----------------|-------------|----------------------------|
| Purpose:   | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate<br><input type="checkbox"/> Protect Casing<br><input type="checkbox"/> Plug Back TD<br><input type="checkbox"/> Plug Off Zone |                  |                |             |                            |

| Shots Per Foot | PERFORATION RECORD - Bridge Plugs Set/Type<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br><i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------|
| 2              | 878-892'; 941-961'; 1018-1030'  | 250 gals of Acid, 42,200 lbs 20/40 sand  | All   |
|                |   | 890 bbls 2% KCL water  |       |

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|   |                    |  |                       |   |
|---|--------------------|--|-----------------------|---|
| TUBING RECORD   | Size <u>2 3/8</u>  | Set At <u>1040'</u>  | Packer At <u>None</u> | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr.<br><b>Awaiting Pipeline Construction</b> |                    | 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. <u>1</u> | Gas Mcf <u>25</u>  | Water Bbls. <u>40</u> | Gas-Oil Ratio <u>40</u> 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) \_\_\_\_\_

Production Interval \_\_\_\_\_

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**CONSOLIDATED**  
OIL WELL  
SERVICES  
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720  
620-431-9210 OR 800-467-8676

TICKET NUMBER **21958**

LOCATION Chanute

**FIELD TICKET**

2-11

|                          |                 |                          |         |               |           |           |               |           |
|--------------------------|-----------------|--------------------------|---------|---------------|-----------|-----------|---------------|-----------|
| DATE<br>4/28/04          | CUSTOMER ACCT # | WELL NAME<br>Quinn # 101 | QTR/QTR | SECTION<br>11 | TWP<br>27 | RGE<br>17 | COUNTY<br>No. | FORMATION |
| CHARGE TO<br>Running Fox |                 |                          |         | OWNER         |           |           |               |           |
| MAILING ADDRESS          |                 |                          |         | OPERATOR      |           |           |               |           |
| CITY & STATE             |                 |                          |         | CONTRACTOR    |           |           |               |           |

| ACCOUNT CODE    | QUANTITY or UNITS | DESCRIPTION OF SERVICES OR PRODUCT                           | UNIT PRICE           | TOTAL AMOUNT       |
|-----------------|-------------------|--|----------------------|--------------------|
| 5401            | 1 well            | PUMP CHARGE Cement Pump                                      | 675 <sup>00</sup>    | 675 <sup>00</sup>  |
| 1118            | 5 sacks           | Pull Gel 3 Sacks I.L. Cement<br>2 ahead of job               | 11 <sup>00</sup>     | 55 <sup>00</sup>   |
| 1107            | 1.5 sacks         | Fibersol   | 37 <sup>00</sup>     | 55 <sup>60</sup>   |
| 4404            | 2                 | 4 1/2 Rubber Plug  | 35 <sup>00</sup>     | 35 <sup>00</sup>   |
| 1123            | 4000 G.           | City Water   | 11 <sup>25</sup>     | 45 <sup>00</sup>   |
| 5407            | 2.11 mile         | BLENDING & HANDLING<br>TON-MILES<br>STAND BY TIME<br>MILEAGE | 190 <sup>00</sup>    | 190                |
| 3501            | 3.5 15 RD         | WATER TRANSPORTS<br>VACUUM TRUCKS<br>FRAC SAND               | 80 <sup>00</sup>     | 280                |
| 1123            | 163 Sacks         | CEMENT 50/30 P2 71/2 2% Gel<br>1/2 Fibersol                  | 6 <sup>00</sup> sack | 1675 <sup>00</sup> |
|                 |                   |  | SALES TAX            | 92 <sup>81</sup>   |
| ESTIMATED TOTAL |                   |  |                      | 2507.25            |

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CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN *Dwayne*

CUSTOMER or AGENT (PLEASE PRINT)

DATE **RELEASED**

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CONSOLIDATED OIL WELL SERVICES, INC.  
 211 W. 14TH STREET, CHANUTE, KS 66720  
 620-431-9210 OR 800-467-8676

TICKET NUMBER **32868**  
 LOCATION Chanute  
 FOREMAN Dayne

**TREATMENT REPORT**

2 11

|                                |                       |                           |                      |
|--------------------------------|-----------------------|---------------------------|----------------------|
| DATE<br><u>4/28/04</u>         | CUSTOMER #            | WELL NAME<br><u>Quinn</u> | FORMATION            |
| SECTION<br><u>11</u>           | TOWNSHIP<br><u>27</u> | RANGE<br><u>17</u>        | COUNTY<br><u>NO.</u> |
| CUSTOMER<br><u>Running Fox</u> |                       |                           |                      |
| MAILING ADDRESS                |                       |                           |                      |
| CITY                           |                       |                           |                      |
| STATE                          |                       | ZIP CODE                  |                      |
| TIME ARRIVED ON LOCATION       |                       |                           |                      |

| TRUCK #    | DRIVER      | TRUCK # | DRIVER |
|------------|-------------|---------|--------|
| <u>255</u> | <u>Todd</u> |         |        |
| <u>230</u> | <u>Wes</u>  |         |        |
| <u>140</u> | <u>Tim</u>  |         |        |
|            |             |         |        |
|            |             |         |        |
|            |             |         |        |
|            |             |         |        |
|            |             |         |        |

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**TYPE OF TREATMENT**

|  |   |
|--|---|
| <input type="checkbox"/> SURFACE PIPE      | <input type="checkbox"/> ACID BREAKDOWN   |
| <input type="checkbox"/> PRODUCTION CASING | <input type="checkbox"/> ACID STIMULATION |
| <input type="checkbox"/> SQUEEZE CEMENT    | <input type="checkbox"/> ACID SPOTTING    |
| <input type="checkbox"/> PLUG & ABANDON    | <input type="checkbox"/> FRAC             |
| <input type="checkbox"/> PLUG BACK         | <input type="checkbox"/> FRAC + NITROGEN  |
| <input type="checkbox"/> MISP. PUMP        | <input type="checkbox"/>                  |
| <input type="checkbox"/> OTHER             | <input type="checkbox"/>                  |

**WELL DATA**

|                                  |                  |
|----------------------------------|------------------|
| HOLE SIZE <u>6 3/4</u>           | PACKER DEPTH     |
| TOTAL DEPTH <u>1130</u>          | PERFORATIONS     |
|                                  | SHOTS/FT         |
| CASING SIZE <u>4 1/2</u>         | OPEN HOLE        |
| CASING DEPTH <u>1125</u>         |                  |
| CASING WEIGHT <u>9.5</u>         | TUBING SIZE      |
| CASING CONDITION                 | TUBING DEPTH     |
|                                  | TUBING WEIGHT    |
|                                  | TUBING CONDITION |
| TREATMENT VIA <u>Cement Plug</u> |                  |

**PRESSURE LIMITATIONS**

|                     | THEORETICAL | INSTRUCTED |
|---------------------|-------------|------------|
| SURFACE PIPE        |             |            |
| ANNULUS LONG STRING |             |            |
| TUBING              |             |            |

**INSTRUCTION PRIOR TO JOB** Break into station and 2 wells from bot followed by a  
well that they do not use a pump in well and received 163 sacks to get the  
ack. stop and wash out pump then added more to get and set float stop

AUTHORIZATION TO PROCEED \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

| TIME AM/PM | STAGE | BBL'S PUMPED | INJ RATE | PROPPANT PPG | SAND / STAGE | PSI |                    |
|------------|-------|--------------|----------|--------------|--------------|-----|--------------------|
|            |       |              |          |              |              |     | BREAKDOWN PRESSURE |
|            |       |              |          |              |              |     | DISPLACEMENT       |
|            |       |              |          |              |              |     | MIX PRESSURE       |
|            |       |              |          |              |              |     | MIN PRESSURE       |
|            |       |              |          |              |              |     | ISIP               |
|            |       |              |          |              |              |     | 15 MIN.            |
|            |       |              |          |              |              |     | MAX RATE           |
|            |       |              |          |              |              |     | MIN RATE           |

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