

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6569  
Name: Carmen Schmitt Inc.  
Address: P.O. Box 47  
City/State/Zip: Great Bend, KS 67530  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Carmen Schmitt  
Phone: (620) 793 5100  
Contractor: Name: Discovery Drilling  
License: 31548  
Wellsite Geologist: Richard P. O'Donnell

**CONFIDENTIAL**

RECEIVED

MAR 25 2004

KCC WICHITA

KCC

MAR 24 2004

**CONFIDENTIAL**

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. \_\_\_\_\_

1-31-04	2-6-04	2-7-04
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 135-24262.00.00  
County: Ness  
NW - NW - NE - NE Sec. 30 Twp. 16 S. R. 23  East  West  
100 FNL feet from S / N (circle one) Line of Section  
1150 FEL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Mast Unit Well #: 1  
Field Name: W.C.

Producing Formation: \_\_\_\_\_  
Elevation: Ground: 2501' Kelly Bushing: 2509'  
Total Depth: 4612' Plug Back Total Depth: 4612'  
Amount of Surface Pipe Set and Cemented at 235.37 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 cmf.  
ALT II P&A w/ 12-19-06

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content 19,000 ppm Fluid volume 320 bbls  
Dewatering method used Evaporation  
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: Carmen Schmitt  
Title: Secretary Date: 3-24-04  
Subscribed and sworn to before me this 24 day of March,  
2004.  
Notary Public: Elaine Schreck  
Date Commission Expires: 12-13-2007

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

NOTARY PUBLIC - State of Kansas  
ELAINE SCHECK  
My Appt. Exp. 12-13-07

X

CONFIDENTIAL

Side Two

RECEIVED  
ORIGINAL MAR 25 2004  
KCC WICHITA

Operator Name: Carmen Schmitt Inc. Lease Name: Mast Unit  
Sec. 30 Twp. 16 S. R. 23  East  West County: Ness

**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  Yes  No  
(Attach Additional Sheets)

Samples Sent to Geological Survey  Yes  No

Cores Taken  Yes  No

Electric Log Run  Yes  No  
(Submit Copy)

List All E. Logs Run:

Dual Induction, Dual Compensated Porosity,  
Sonic

Log Formation (Top), Depth and Datum  Sample

Name	Top	Datum
Anhydrite	1858	+ 651
Heebner Shale	3900	-1391
Lansing	3942	-1433
Base Kansas City	4230	-1721
Fort Scott	4430	-1921
Cherokee Shale	4454	-1945
Basal Sandstone	4506	-1997
Mississippian	4551	-2042

CASING RECORD <input type="checkbox"/> New <input checked="" 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	12.25"	8.625"	28	235.37	Common	150	2% gel, 3% c.c.

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				

CONFIDENTIAL

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

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
		<input type="checkbox"/> Flowing <input 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

Disposition of Gas      METHOD OF COMPLETION      Production Interval

Vented    Sold    Used on Lease    Open Hole    Perf.    Dually Comp.    Commingled

(If vented, Submit ACO-18.)    Other (Specify) \_\_\_\_\_



CHARGE TO:  
 -CARMEN SCHMIDT  
 ADDRESS  
 CITY, STATE, ZIP CODE

RECEIVED  
 MAR 25 2004  
 KCC WICHITA

TICKET No. 6466  
 PAGE 1 OF 1

SERVICE LOCATIONS 1. CEC, KS	WELL/PROJECT NO. #1	LEASE MUST UNIT	COUNTY/PARISH NESS	STATE KS	CITY	DATE 1-31-04	OWNER SAME
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR DISCOVERY DRILLING	RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOCATION	ORDER NO.	
3.	WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 8 5/8" SURFACE	WELL PERMIT NO.		WELL LOCATION DANSON OCT - 1/2 E, W-S-W	
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		1			MILEAGE # 104	15		ME		2.50	37.50	
576		1			PUMP SERVICE	1		JOB	235	550.00	550.00	
410		1			TOP PWB	1		EA	8 5/8"	60.00	60.00	
325		1			STANDARD CEMENT	155		SKS		7.00	1085.00	
278		1			CALCIUM CHLORIDE	4		SKS		25.00	100.00	
279		1			BENTONITE GEL	3		SKS	300	11.00	33.00	
581		1			SERVICE CHARGE CEMENT	155		SKS		1.00	155.00	
582		1			MEMORUM DRAZAGE CHARGE	15190		ORS	113.925	7M	100.00	100.00

KCC  
 MAR 24 2004  
 CONFIDENTIAL

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED: 1-31-04  
 TIME SIGNED: 1500  
 A.M.  
 P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	2120.50
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	67.73
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	2188.23
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

**CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES** The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR  
 WAVER WILSON

APPROVAL

Thank You!



CHARGE TO: *Carmen Schmidt Inc.*  
 ADDRESS:  
 CITY, STATE, ZIP CODE:

RECEIVED  
 MAR 25 2004  
 KCC WICHITA  
 TICKET No 6514  
 PAGE 1 OF 1

SERVICE LOCATIONS  
 1. WELL/PROJECT NO. *#1* LEASE *Must Wait* COUNTY/PARISH *Ness* STATE *Ks.* CITY DATE *2-7-04* OWNER *Same*  
 2. TICKET TYPE  SERVICE  SALES CONTRACTOR *Discovery Drilling* RIG NAME/NO. SHIPPED VIA *CIT* DELIVERED TO *Lee* ORDER NO.  
 3. WELL TYPE *Oil* WELL CATEGORY *Development* JOB PURPOSE *Plug To Abandon* WELL PERMIT NO. WELL LOCATION  
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
575		1			MILEAGE #103	20	mil			250	50	00
576		1			Pump Service	1	ea			550	550	00
410		1			Top Plug	1	ea	278	in	60	60	00
531		1			Service Charge	255	SL			1	255	00
533		1			Drayage	218.28	TON miles			05	185	96
328		1			60/40 Hz 6% Col	255	SL			5	1504	00
276		1			Flood	64	#			90	57	00

KCC  
 MAR 24 2004  
 CONFIDENTIAL

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.  
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS  
 X *Thomas*  
 DATE SIGNED TIME SIGNED  A.M.  P.M.

REMIT PAYMENT TO:  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	TAX	TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				2,663		
WE UNDERSTOOD AND MET YOUR NEEDS?						
OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?					85	197
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO						2749
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						103

**CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES** The customer hereby acknowledges receipt of the materials and services listed on this ticket.  
 SWIFT OPERATOR *Ray B. Lyford* APPROVAL  
 Thank You!