

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

RECEIVED

MAY 19 2004

Operator: License # 3830

Name: AX&P, Inc. KCC WICHITA

Address P.O. Box 1176

City/State/Zip Independence, Ks 67301

Purchaser: Farmland

Operator Contact Person: J.J. Hanke

Phone (620) 325-5212

Contractor: Name: Patrick Tubbs

License: 33079

Wellsite Geologist: JJ Hanke

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

12/1/03 12/29/03 1/6/04
Spud Date Date Reached TD Completion Date

API NO. 15-205-25685-00 00

County Wilson

NW SE NW Sec. 28 Twp. 30 Rge. 16

3640 Feet from S/N (circle one) Line of Section

3560 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 Unit 1-Keys Heirs Well # KH# 18

Field Name Neodesha

Producing Formation Neodesha Sand

Elevation: Ground 600' KB _____

Total Depth 840' PBTD _____

Amount of Surface Pipe Set and Cemented at 30 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 835

feet depth to surface w/ 96 sx cat

Drilling Fluid Management Plan ALT II WITH 12-11-06
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbl

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. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 _____ Date 5/19/04

Title _____

Subscribed and sworn to before me this 10 day of MAY 2004.

Notary Public Alta M. Michaelis

Date Commission Expires Dec. 6, 2007

ALTA M. MICHAELIS
Notary Public - State of Kansas
My Appt. Expires

K.C.C. OFFICE USE ONLY			
F	<input type="checkbox"/>	Letter of Confidentiality Attached	
C	<input type="checkbox"/>	Wireline Log Received	
C	<input type="checkbox"/>	Geologist Report Received	
Distribution			
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep	<input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other
(Specify)			

Operator Name AX&P, Inc.

Lease Name Unit 1 - Keys Heirs Well # KH#18

Sec. 28 Twp. 30 Rge. 16

East
 West

County Wilson

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 sheets if more space is needed. Attach copy of log.

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:

Gamma Ray - Neutron

Log Formation (Top), Depth and Datum Sample

Name Top Datum

Oswego 613'

Neodesha Sd. 795'

CASING RECORD

New 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"	6 5/8"		30'	Portland	11	
production	5 1/4"	2 7/8"	6.8	835	Portland	96	2% gel

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth
1	795-802	frac w/ 32 sx/135 BW

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SVD or Inj. 1-13-04 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	5		25		

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 Inter _____