

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

Operator: License # 33254
Name: Warren D Showers
Address: 31516 West 217th
City/State/Zip: Spring Hill, KS 66083

Purchaser: _____
Operator Contact Person: Doug Showers

Phone: (913) 856-5309
Contractor: Name: Glaze Drilling

License: 33254
Wellsite Geologist: N/A

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: N/A

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. _____

7-2-03 7-7-03 7-8-03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date
ALG W/H/W/KCC/OP/ER

API No. 15 - 15-121-27,722 0000
County: Miami

S2. NW 1/4 NE Sec. 22 Twp. 15 S. R. 22 East West
4760 feet from S / N (circle one) Line of Section
2310 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW

Lease Name: Showers1 Well #: 1
Field Name: Showers

Producing Formation: _____
Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: 660 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 0
feet depth to 20 w/ 6 _____ sx cmt.
ALT II WITHIN 1-19-07

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.: _____

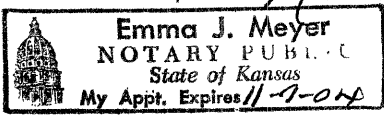
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Warren D Showers
Title: Owner Date: 9-22-03

Subscribed and sworn to before me this 22 day of September,
20 03.

Notary Public: Emma J Meyer
Date Commission Expires: Nov. 7, 2004



KCC Office Use ONLY

____ Letter of Confidentiality Attached

If Denied, Yes Date: _____

____ Wireline Log Received

____ Geologist Report Received

____ UIC Distribution

Operator Name: Warren D Showers Lease Name: Showers1 Well #: 1
 Sec. 22 Twp. 15 S. R. 22 East West County: Miami

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:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

Drillers Log Attached

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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	# Sacjs Used	Type and Percent Additives
Surface	7 inch	7 inch	-----	20 foot	Portland	6	Water
Prod. Pipe	6 inch	2 7/8 inch	-----	652 650 foot	Consolidated	Ticket	Attached

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		NONE		

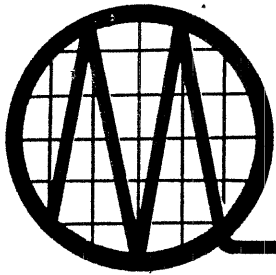
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2 Per Foot	Perforated at 578.0 ft. to 586.0 ft. @ 2 per foot		

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. 10-15-03	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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
		10,000		

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) Home use



MIDWEST SURVEYS

LOGGING • PERFORATING • M.I.T. SERVICES

P. O. Box 68
Osawatomie, KS 66064
913 / 755-2128

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Date 7/17/03

TERMS AND CONDITIONS: Midwest Surveys is hereby instructed to deliver the equipment or perform the services ordered hereon or as verbally directed, under the terms and conditions printed on the reverse side of this order, which I have read and understand and which I accept as Customer or as Customer's Authorized Agent.

Service and/or Equipment Ordered *Gamma Ray / Neutron / CCL & Perforate*

SIGN BEFORE COMMENCEMENT OF WORK

Customer's Name *Douglas Showers* By *[Signature]*
Customer's Authorized Representative

Charge to *Douglas Showers* Customer's Order No. *A. Glaze*

Mailing Address

Well or Job Name and Number *Showers no-1* County *Miami* State *Kansas*

QUANTITY	DESCRIPTION OF SERVICE OR MATERIAL	PRICE
<i>1 cu</i>	<i>Gamma Ray / Neutron / CCL</i>	<i>\$ 300.00</i>
<i>17 cu</i>	<i>2" OML RTG 180° Phase</i> <i>Two (2) Perforations Per Foot</i>	
	<i>Minimum Charge - Ten (10) Perforations</i>	<i>\$ 500.00</i>
	<i>Seven (7) Additional Perforations @ 18.00 cu</i>	<i>\$ 126.00</i>
	<i>Perforated at 5780 To 5860</i>	

Total *\$ 926.00*

The above described service and/or material has been received and are hereby accepted and approved for payment.

Served by: *S. Windisch*

Customer's Name *Douglas Showers*
By *Douglas Showers* Date *7/17/03*
Customer's Authorized Representative



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

TICKET NUMBER **20505**

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

LOCATION Ottawa

FIELD TICKET

DATE 7.8.03	CUSTOMER ACCT # 7630	WELL NAME #1 Showers #1	QTR/QTR	SECTION 22	TWP 15	RGE 22	COUNTY MI	FORMATION
CHARGE TO Doug Showers				OWNER 913-768-0828				
MAILING ADDRESS 31516 W 217th				OPERATOR				
CITY & STATE Springhill KS 66089				CONTRACTOR B.S. Glaze				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE cement one well		525 ⁰⁰
5402	652'	casing footage	14	NC
1118	45x	premium gel	11 ⁸⁰	4720
4402	1	2 1/2 rubber plug		1502
<p>PAID \$1585</p> <p>THANKS!</p>				
5407	minimum	BLENDING & HANDLING TON-MILES STAND BY TIME MILEAGE		190 ⁰⁰
5502	2 1/2	WATER TRANSPORTS VACUUM TRUCKS FRAC SAND	70 ⁰⁰	175 ⁰⁰
1124	119	CEMENT 50150 ⁰⁰²	645	767 ⁵⁵
			SALES TAX	56 ⁴²
				54 ³⁵
ESTIMATED TOTAL				1776 ¹⁷

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645
680
OK
56.42
56.42
56.42

Ravin 2790

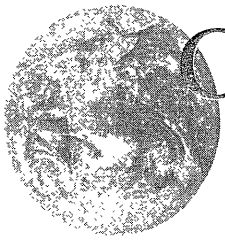
CUSTOMER or AGENTS SIGNATURE Doug Showers

CIS FOREMAN Alan Mader

CUSTOMER or AGENT (PLEASE PRINT)

DATE 7-8-03

185121



CONSOLIDATED OIL WELL SERVICES, INC.

AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 620/431-9210 • 1-800/467-8676

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INVOICE DATE	INVOICE NO.
07/15/03	00185121

S SHOWERS, DOUG
 O 31516 W. 217TH
 L SPRINGHILL KS 66083
 D
 T
 O

CONSOLIDATED OIL WELL SERVICES, INC.
 DEPT. 3667
 135 SOUTH LASALLE
 CHICAGO, IL 60674-3667

TERMS: Net 30 Days

A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	PO NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
7630	0146	20	SHOWERS 1	07/08/2003	20505		
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5401			CEMENT PUMPER	1.0000	525.0000	EA	525.00
5402			CASING FOOTAGE	652.0000	.0000	EA	.00
1118			PREMIUM GEL	4.0000	11.8000	SK	47.20
4402			2 1/2" RUBBER PLUG	1.0000	15.0000	EA	15.00
5407			BULK CEMENT DELIVERY/MIN BULK DEL	1.0000	190.0000	EA	190.00
5502			80 BBL VACUUM TRUCK	2.5000	70.0000	HR	175.00
1124			50/50 POZ CEMENT MIX	119.0000	6.4500	SK	767.55

pd
CK # 1585
Thank you
Suzanne
Manager

GROSS INVOICE	TAX
1719.75	56.42

ORIGINAL INVOICE

PLEASE PAY
1776.17

20	Surface	20
13	lime	33
07	shale	60
11	lime	61
43	shale	104
5	lime	109
11	shale	120
16	lime	136
29	shale	165
8	lime	173
31	shale	214
3	lime	217
7	shale	224
25	lime	249
3	shale	252
1	Blk Slate	253
4	shale	257
22	lime	279
3	shale	282
2	Blk Slate	284
3	lime	288
4	shale	291
17	lime	298
29	shale	327
8	sand	335
7	shale	342
12	Sand & Shale	355
52	shale	407
10	Sandy Shale	417
20	shale	437
2	Blk Slate	439
34	shale	473
4	lime	477
16	shale	493
6	lime	499

GAS 22,000

INCREASE TO 35,000.

Doug Showers GAS well # /
7/03

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1	Sand	50	Brown	increased to 60,000	
2 1/2	Shale	501			
4	lime	525			
7	Blk Slate	526		increased to 85,000	
4	Shale	530			
11	lime	541			
3	Shale	544			
6	Red Bed	550			
8	Shale	558			
2	Blk Slate	560			
17	Shale	577		580-120,000	
11	Sandstone	588	BIG GAS	250,000 total	↓
72	Shale	660	T.D.		

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