

ORIGINAL

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

Operator: License # 5039
Name: A G V Corp.
Address: 123 N Main
City/State/Zip: Attica, Ks 67009
Purchaser: _____
Operator Contact Person: Larry G. Mans
Phone: (620) 254-7222
Contractor: Name: Summit Drilling
License: 30141
Wellsite Geologist: Rod Anderson

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MAY 04 2004

KCC WICHITA

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. _____
8-14-2003 8-23-2003
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 191-22410-0000
County: Sumner
c N¹/₂ NW NE Sec. 24 Twp. 32 S. R. 4 East West
330 feet from S / (circle one) Line of Section
1980 feet from (circle one) W Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Weishaar Well #: 1-24
Field Name: Love Three
Producing Formation: None
Elevation: Ground: 1215 Kelly Bushing: 1225
Total Depth: 2998 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 252' 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.
ALT I WTM 10-17-00

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: D & A Oil
Lease Name: Ivy SWD License No.: 30914
Quarter SE Sec. 32 Twp. 31 S. R. 2 East West
County: Sumner Docket No.: D-15797

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: Larry G Mans
Title: Secretary Date: 4-30-04
Subscribed and sworn to before me this 30th day of April, 2004
Notary Public: Agnes Eck
Date Commission Expires: 10-7-2007

AGNES ECK
Notary Public - State of Kansas
My Appt. Expires 10-7-2007

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

Operator Name: A G V Corp. Lease Name: Weishaar Well #: 1-24
 Sec. 24 Twp. 32 S. R. 4 East West County: Sumner

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 <i>(Attach Additional Sheets)</i> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table border="0" style="width: 100%;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>Upper Howard</td> <td>2048</td> <td>-823</td> </tr> <tr> <td>Middle Howard</td> <td>2120</td> <td>-895</td> </tr> <tr> <td>Topeka</td> <td>2190</td> <td>-965</td> </tr> <tr> <td>Iatan</td> <td>2973</td> <td>-1748</td> </tr> <tr> <td>Stalnaker</td> <td>2986</td> <td>-1761</td> </tr> <tr> <td>RTD</td> <td>2998</td> <td></td> </tr> </table>	Name	Top	Datum	Upper Howard	2048	-823	Middle Howard	2120	-895	Topeka	2190	-965	Iatan	2973	-1748	Stalnaker	2986	-1761	RTD	2998	
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CASING RECORD <input checked="" 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	12"	8 5/8	23#	252'	60/40 Poz	200	2% CC

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				

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

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
D & A		<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 <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____
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INVOICE NO.
Date 8-14-03
Customer ID

Subject to Correction

FIELD ORDER 6924

Lease WEISHAAR Well # 1-24 Legal 24-325-4W
 County Sumner State Ks Station PRATT
 Depth 23 1/2 FT Formation Shoe Joint 15' CUSTOMER REC
 Casing 8 5/8 Casing Depth 252' TD 270' Job Type 8 5/8 SURFACE NEW WELL
 Customer Representative TODD RUSSELL Treater T. SEBA

CHARGE

AFE Number PO Number

Materials Received by **X** Todd Russell

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D-203	200 SKS	6040 Poz	✓			
C-310	516 lbs	CALCIUM CHLORIDE	✓			
C-194	50 lbs	CELLPLATE	✓			
F-163	1 EA	WOODEN PLUG 8 5/8	✓			
E-107	200 SKS	CMT SERV. CHARGE				
E-100	75 MI	UNITS 1WAY MILES 75				
E-104	645 TM	TONS MILES				
R-200	1EA	EA. 252' PUMP CHARGE				
R-701	1EA	CMT HEAD RENTAL				
		DISCOUNTED PRICE =		3,103.98		
		+ TAXES				

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MAY 04 2004
KCC WICHITA

10244 NE Hiway 61 · P.O. Box 8613 · Pratt, KS 67124-8613 · Phone (620) 672-1201 · Fax (620) 672-5383 **TOTAL**