

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

CONFIDENTIAL

ORIGINAL

Operator: License # 32511
Name: Imperial American Oil Corporation
Address: 303 N Carroll Blvd #214
City/State/Zip: Denton TX 76201
Purchaser: NCRA
Operator Contact Person: Hal Porter
Phone: (940) 483-9148
Contractor: Name: Murfin Drilling Company, Inc.
License: 30606
Wellsite Geologist: Randall Kilian

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. _____

3/10/03 3/17/03 4/9/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 051-25,197 0000
County: Ellis
NW, SE, NE, SW Sec. 26 Twp. 11 S. R. 16 East West
1490 feet from S (circle one) Line of Section
945 feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Sharon Well #: 26-2
Field Name: Un-named
Producing Formation: Topeka, LKC

Elevation: Ground: 1753 Kelly Bushing: 1758
Total Depth: 3494 Plug Back Total Depth: 3447
Amount of Surface Pipe Set and Cemented at 910 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 cm.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 58,000 ppm Fluid volume 400 bbls
Dewatering method used allow to dry, backfill
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: _____
Title: President Date: April 15, 2003
Subscribed and sworn to before me this 15th day of April,
~~2003~~ 2003
Notary Public: Kelly E Burns
Date Commission Expires: 1/23/07



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

CONFIDENTIAL

Side Two

ORIGINAL

Operator Name: Imperial American Oil Corporation Lease Name: Sharon Well #: 26-2
Sec. 26 Twp. 11 S. R. 16 East West County: Ellis

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 (Attach Additional Sheets) Samples Sent to Geological Survey Cores Taken Electric Log Run (Submit Copy) List All E. Logs Run: Dual Induction, Comp. N-D, Micro
Log Formation (Top), Depth and Datum Sample Name Top Datum Anhydrite 912 +846 Topeka 2680 -922 Lansing 2973 -1215 Arbuckle 3388 -1630
KCC APR 15 2003 CONFIDENTIAL

CASING RECORD Table with columns: 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. Rows for Surface and Production.

ADDITIONAL CEMENTING / SQUEEZE RECORD Table with columns: Purpose, Depth Top Bottom, Type of Cement, #Sacks Used, Type and Percent Additives.

PERFORATION RECORD - Bridge Plugs Set/Type Table with columns: Shots Per Foot, Specify Footage of Each Interval Perforated, Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used), Depth.

TUBING RECORD Table with columns: Size, Set At, Packer At, Liner Run, Date of First, Resumed Production, SWD or Enhr., Producing Method, 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
Other (Specify)

ALLIED CEMENTING CO., INC. 13304

Federal Tax I.D.#

REMIT TO P.O. BOX 1
RUSSELL, KANSAS 67665

CONFIDENTIAL

KCC

SERVICE POINT:

ORIGINAL

APR 15 2003

R

DATE <u>3-17-03</u>	SEC.	TWP.	RANGE	CALLED OUT <u>CONFIDENTIAL</u>	ON LOCATION <u>10:30 AM</u>	JOB START <u>1:45 AM</u>	JOB FINISH <u>2:30 AM</u>
LEASE <u>SHARON</u> WELL # <u>Z6-Z</u>			LOCATION <u>FARPORT 2N 1W</u>		COUNTY <u>ELLIS</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR MURFEN IL

TYPE OF JOB PRODUCTION STRING

HOLE SIZE 7 7/8 T.D. 3494

CASING SIZE 5 1/2 DEPTH 3493

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT 45

CEMENT LEFT IN CSG. 45'

PERFS. _____

DISPLACEMENT 84 BBL

OWNER _____

CEMENT

AMOUNT ORDERED 175 ASC 290 CEL
500 CAL WFR 2

EQUIPMENT

PUMP TRUCK CEMENTER MARK

345 HELPER LIEN

BULK TRUCK

282 DRIVER BRENT

BULK TRUCK

_____ DRIVER _____

COMMON	<u>175 ASC</u>	@	<u>8.50</u>	<u>1487.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>10.00</u>	<u>30.00</u>
CHLORIDE		@		
WFR-2	<u>500 gals</u>	@	<u>1.00</u>	<u>500.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>175</u>	@	<u>1.40</u>	<u>192.50</u>
MILEAGE	<u>44.5</u>	@	<u>1.75</u>	<u>77.88</u>

RECEIVED

APR 17 2003

TOTAL 2325.00

KCC WICHITA SERVICE

REMARKS:

15 SKS C. RH.

FLOAT HELD

THANKS

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 1130.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 25 @ 3.00 75.00

PLUG 5 1/2 TRP @ _____ 50.00

TOTAL 1255.00

CHARGE TO: IMPERIAL AMERICAN

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>5 1/2</u>			
GUIDE SHOE	@	<u>150.00</u>	
INSERT	@	<u>235.00</u>	
8-CENT	@	<u>40.00</u>	<u>320.00</u>
20-RECTP SCRATCHER	@	<u>35.00</u>	<u>700.00</u>
	@		

TOTAL 1405.00

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE _____

[Signature]

PRINTED NAME

ALLIED CEMENTING CO., INC. 11395

REMIT TO P.O. BOX 30
RUSSELL, KANSAS 67665

Federal Tax ID.#

CONFIDENTIAL

APR 15 2003

SERVICE POINT

ORIGINAL

Russell

DATE 3-11-03	SEC. 26	TWP. 11 S	RANGE 16 W	WELDED OUT 6:30 AM	ON LOCATION 7:00 PM	JOB START 8:00 PM	JOB FINISH 8:45 PM
LEASE Sharon	WELL # 26-2	LOCATION Fairport 2ND 2W 2S.	COUNTY ELLIS	STATE KANSAS			
<input checked="" type="radio"/> OLD OR <input type="radio"/> NEW (Circle one)							

CONTRACTOR MURFIN DELG Rig #16

TYPE OF JOB Long Surface

HOLE SIZE 12 1/4 T.D. 911

CASING SIZE 8 5/8 New DEPTH 910

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM 37'

MEAS. LINE 37' SHOE JOINT 45'

CEMENT LEFT IN CSG. 45'

PERFS. _____

DISPLACEMENT 55 3/4 / BBL

OWNER _____

CEMENT AMOUNT ORDERED 425 SK 60/40 2% gel

3% CC

COMMON	<u>255</u>	@	<u>665</u>	<u>1695 75</u>
POZMIX	<u>170</u>	@	<u>355</u>	<u>603 50</u>
GEL	<u>8</u>	@	<u>10 00</u>	<u>80 00</u>
CHLORIDE	<u>13</u>	@	<u>30 00</u>	<u>390 00</u>
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
_____	_____	@	_____	_____
HANDLING	<u>425</u>	@	<u>110</u>	<u>467 50</u>
MILEAGE	<u>44 1/2 SK</u>	@	<u>10 00</u>	<u>425 00</u>
TOTAL				<u>3661 75</u>

EQUIPMENT _____

PUMP TRUCK # 345 CEMENTER Clear

BULK TRUCK # 362 DRIVER Shane

BULK TRUCK # _____ DRIVER _____

RECEIVED
APR 17 2003

REMARKS: KCC WICHITA SERVICE

Cement CIRCULATED

DEPTH OF JOB _____

PUMP TRUCK CHARGE 630 00

EXTRA FOOTAGE _____ @ _____

MILEAGE 25 @ 3 00 75 00

PLUG 8 5/8 RUBBER @ 100 00

_____ @ _____

_____ @ _____

THANK you!

TOTAL 805 00

CHARGE TO: Imperial American

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1- Baffle Plate @ 45 00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 45 00

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You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Bill Wynn

Thanks

PRINTED NAME Bill Wynn