

ORIGINAL

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 # 33036
Name: Strata Exploration, Inc.
Address: PO Box 401
City/State/Zip: Fairfield, IL. 62837
Purchaser: Plains/Oneok
Operator Contact Person: John R. Kinney
Phone: (618) 897-2799
Contractor: Name: Midwestern Well Service
License: 5112
Wellsite Geologist: Jon Christensen

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MAY 03 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: Strata Exploration, Inc

Well Name: Stoops Webber #1

Original Comp. Date: 5/22/2002 Original Total Depth: 5670'

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. _____

3/11/2004 3/17/2004
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 081-21448-00-01
County: Haskell
S/2 S/2 S/2 Sec. 22 Twp. 29 S. R. 32 East West
446 feet from (S) N (circle one) Line of Section
2505 feet from (E) W (circle one) Line of Section

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

Lease Name: Stoops-Webber Well #: 1
Field Name: Lockport

Producing Formation: Morrow

Elevation: Ground: 2899.6' Kelly Bushing: 2912

Total Depth: 5670' Plug Back Total Depth: 5500'

Amount of Surface Pipe Set and Cemented at 1791 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 3315 Feet

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ACTI WHTM 2-6-07
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume NA bbls

Dewatering method used NA

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: John R. Kinney
Title: President Date: 4/5/2004

Subscribed and sworn to before me this 5th day of April,
2004.

Notary Public: Barbara Feather

Date Commission Expires: _____

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

OFFICIAL SEAL
Barbara Feather
Notary Public, State of Illinois
My Commission Expires: 12/30/06

Operator Name: Strata Exploration, Inc. Lease Name: Stoops-Webber Well #: 1
 Sec. 22 Twp. 29 S. R. 32 East West County: Haskell

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)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Previously submitted w/ original ACO-1

List All E. Logs Run:

Previously submitted w/ original ACO-1

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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	# Sacks Used	Type and Percent Additives
Surface	12 1/4	8 5/8 new	24	1791'	Midcon C Prem Plus C	400 280	3% CC 1/4 Flake 2% CC 1/8 Flake
Long String	7 7/8	5 1/2 new	15.5	5660'	50/50 Poz C	200	5% CC 6# Gilsontif 5% Kel + 5% Haled 322
Port Collar				3315'	midcon C	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 (Amount and Kind of Material Used)	Depth
	CIBP set @ 5500'		5500'
3 SPF	Perforate 5343-5362' (Morrow)	Acidize W 1000 gal 7.5% MCA -FE	5343-5362'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8	5483'	NA	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
3/24/2004		<input type="checkbox"/> Flowing <input checked="" 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
	125	110	0	880:1	31

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 Interval _____