

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

DESCRIPTION OF WELL & LEASE
CONFIDENTIAL

Operator: License # 33300
Name: Evergreen Operating Corporation
Address: 1401 17th Street, Suite 1200
City/State/Zip: Denver CO 80202
Purchaser: _____
Operator Contact Person: Tom Erwin, Sr. Engineer
Phone: (303) 298-8100 ext 1235
Contractor: Name: Layne Christensen Company
License: 32999
Wellsite Geologist: Richard Robba, PG
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., _____, _____, _____, 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. _____
1/11/2004 1/12/2004 SI WOCU 2/12/2004
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 085-20066-00-00
County: Jackson
C NW SE Sec. 35 Twp. 5 S. R. 16 East West
1950 feet from (S) N (circle one) Line of Section
1910 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Liggatt Well #: 33-35
Field Name: Forest City Coal Gas Area
Producing Formation: Cherokee Group
Elevation: Ground: 1095' Kelly Bushing: 1095'
Total Depth: 2260 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 217 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.
Drilling Fluid Management Plan ALT I WITHIN 2-6-07
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume 500 bbls
Dewatering method used Drilled w/air & fresh water. Trucked to disposal.
Location of fluid disposal if hauled offsite:
Operator Name: Evergreen Operating Corporation
Lease Name: *Liggatt 33-35 WD License No.: 33300
Quarter NWSE Sec. 35 Twp. 5 S. R. 16 East West
County: Jackson Docket No.: _____

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WICHITA, KS

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: Thomas M. Erwin
Title: Sr Engineer Date: 05/06/2004
Subscribed and sworn to before me this 6th day of May,
2004.
Notary Public: Karen Brun
Date Commission Expires: 11/24/07

KCC Office Use ONLY	
<u>Yes</u>	Letter of Confidentiality Attached
_____	If Denied, Yes <input type="checkbox"/> Date: _____
_____	Wireline Log Received
_____	Geologist Report Received
_____	UIC Distribution

X

Side Two

Operator Name: Evergreen Operating Corporation Lease Name: Liggatt Well #: 33-35
 Sec. 35 Twp. 5 S. R. 16 East West County: Jackson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HeebnerShale	724	371
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	925	170
List All E. Logs Run:		Stark Shale	1205	-110
CNL - IND- CBL		B/Kansas City	1258	-163
Tebo shale	1569'	Altamount	1360	-265
Mississippi	2163'	Summit	1457	-362
		Excello	1477	-382
		Vshale	1569	-474

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	24	217	Surface Set	117	3% gypsum
Production	7 7/8	5 1/2	15.5	2204'	Vermejo	578	2% cacl2

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
	To be submitted at a later date	Wait on completion unit.	
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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.	Producing Method
	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other <i>(Explain)</i>

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

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other <i>(Specify)</i> <u>SI WOCU</u>	

Customer E.O.C.			Date 1/11/04	F.R. #	Service Supervisor Ray Decker								
Lease & Well Name – LIGGATT 33 – 35			Location RANGE5TOWN716E		County – Parish – Block JACKSON COUNTY								
District		Drilling Contractor Rig # LAYNE			Type of Job 8 5/8 SURFACE								
Size & Types of Plugs			List – CSG - Hardware			Physical Slurry Properties							
Top			3 CENTRALIZERS			Slurry WGT PPG	Slurry YLD Ft ³	Water GPS	Pump Time Hr:Min	Std Slurry	Std Mix Water		
Btm			1 GUIDE SHOE										
Materials Furnished													
117 SKS SURFACE SET						15.5	1.20	5.2					
2 lbs red dye													
Available mix fluid						Bbl.	Available Displ. Fluid			Bbl.	Total		
Hole			TBG-CSG-D.P.			TBG-CSG-D.P.			Collar Depths				
Size	% Excess	DepthH	Size	WGT	Type	Depth	Size	WGT	Type	Depth	Shoe	Float	
11"		222'	8 5/8	24 #		217'							
Last Casing			Pkr - Cmt Ret – Br PI - Liner			Perf Depth		Top Conn		Well Fluid			
Csg.	WGT	Type	Depth	Brand & Type		Depth	Top	Btm	Size	Thread	Type	WGT	
									5 1/2	8rd	H2O	8.33	
Cal Displ Vol – Bbl 12.5 BBL.				Cal Psi	Cal Max Psi	OP Max 1000 PSI	Max Tbg PSI		Max Csg PSI		Displ Fluid	Water	
TBG	CSG	CSG	Total	Bump Plug	To Rev	SQ PSI	Rated	OP	Rate d	OP	Type	WGT	Source
						1000 PSI					H2o	8.33	Tank
Explanation: WELL DID CIRCULATE. PUMPED 6 BBLS CMT. TO PIT.													
Pressure/Rate Detail						Explanation							
Time HR:Min	Pressure – PSI		Rate BPM	Bbl Fluid Pumped	Fluid Type	Safety Meeting: Crew x Co. Rep x							
	Pipe	Annulus				Testing Lines Psi 1000							
0730						CALLED OUT							
1030						ON LOCATION							
1100						RIG UP							
1115						PRIMED UP / MIX 10 BBLS CMT. @ 15.5 PPG							
1115	35		2.5	10	H2O	PUMP H2O AHEAD W/ RED DYE							
1120	70		2.5	25	CMT	PUMP CMT. @ 15.5 PPG							
1130	120		2.5	12.5	H2O	DISPLACE CMT. W/H2O							
1135	40					SHUT IN WELL							
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5 BBLS DISPL. – 30 PSI													
10 BBLS DISPL. – 50 PSI													
12 BBLS DISPL. – 120 PSI													
Bumped Plug	PSI to Bump Plug	Test Float Equip	Bbl CMT Returns/ Reversed	Total Bbl Pumped	PSI Left On CSG	Spot Top Cement	Serv. Supv.						
N/A	N/A	N	6 BBL	47.5 BBL	60	Y	Ray Decker						

Customer E.O.C.				Date 1/17/04	F.R. #	Service Supervisor Ray Decker							
Lease & Well Name – LIGGATT 33-35				Location 18S23ESEC20		County – Parish – Block JACKSON COUNTY							
District		Drilling Contractor Rig # LAYNE			Type of Job 5 ½ Longstring								
Size & Types of Plugs			List – CSG - Hardware			Physical Slurry Properties							
Top	5 ½ LATCH DOWN PLUG / BAFFLE		20 CENTRALIZERS			Slurry WGT PPG	Slurry YLD Ft ³	Water GPS	Pump Time Hr:Min	Std Slurry	Std Mix Water		
Btm			1 GUIDE SHOE										
Materials Furnished													
578 SKS Vermejo						13.3	1.45	9.76					
2 lbs red dye													
Available mix fluid						Bbl.	Available Displ. Fluid		Bbl.	Total			
Hole			TBG-CSG-D.P.			TBG-CSG-D.P.			Collar Depths				
Size	% Excess	DepthH	Size	WGT	Type	Depth	Size	WGT	Type	Depth	Shoe	Float	
8 1/4		2260'	5 ½	15.5 #		2248'							
Last Casing			Pkr - Cmt Ret – Br PI - Liner			Perf Depth		Top Conn		Well Fluid			
Csg.	WGT	Type	Brand & Type			Depth	Top	Btm	Size	Thread	Type	WGT	
8 5/8	24#					217'			5 1/2	8rd	H20	8.33	
Cal Displ Vol – Bbl 52.5 BBL.			Cal Psi	Cal Max Psi	OP Max 1500 PSI	Max Tbg Psi	Max Csg Psi		Displ Fluid		Water		
TBG	CSG	CSG	Total	Bump Plug	To Rev	SQ PSI	Rated	OP	Rate d	OP	Type	WGT	Source
						1500 PSI					H2o	8.33	Tank
Explanation: WELL DID CIRCULATE. DID BUMP PLUG AND PLUG HELD.													
Pressure/Rate Detail						Explanation							
Time HR:Min	Pressure – PSI		Rate BPM	Bbl Fluid Pumped	Fluid Type	Safety Meeting: Crew x Co. Rep x							
	Pipe	Annulus				Testing Lines Psi 2000							
1100						ON LOCATION,							
1415						SAFETY MEETING / RIG UP							
1435	2000		.5	1	H20	TEST LINES							
1440	90		3.5	10	H20	PUMP H20 W/DYE							
1445	80		3.0	149	CMT	PUMP CMT @ 13.3 PPG							
1545	550		3.0	52.5	H20	PUMP DISPLACEMENT							
1620	1500		.50		H20	BUMPED PLUG							
						15 BBLs DISPL. – 200 PSI							
						30 BBLs DISPL. - 325 PSI							
						45 BBLs DISPL. – 550 PSI							
Bumped Plug	PSI to Bump Plug	Test Float Equip	Bbl CMT Returns/ Reversed	Total Bbl Pumped	PSI Left On CSG	Spot Top Cement	Serv. Supv.						
Y	1500	Y	30 BBL	212.5 BBL	0	Y							
							Ray Decker						

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