KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form ACO-1 September 1999 Form Must Be Typed

WELL COMPLETION FORM

DESCRIPTION OF WELL & LEASE ORIGINA API No. 15 - 051-25,196-0000 Operator: License # 32511 Name: Imperial American Oil Corporation County: Ellis Address: 303 N. Carroll Blvd #214 SE _NW_ NW_ Sec. 2 Two. 12 S. R. 16 East West City/State/Zip: Denton TX 76201 930 feet from S (N Kcircle one) Line of Section Purchaser: NCRA 1266 feet from E (W) (circle one) Line of Section Operator Contact Person: Hal Porter Footages Calculated from Nearest Outside Section Corner: Phone: (940) 483-9148 (circle one) Well # 22-1 2-1 Contractor: Name: Murfin Drilling Company, Inc. Lease Name: Carrie Field Name: Wildcat License: 30606 <u>MAY 0 8 2003</u> Producing Formation: Topeka, Toronto, Oread, LKC Wellsite Geologist: Randall Kilian KCC WICHITA Kelly Bushing: 1765 Elevation: Ground: 1760 **Designate Type of Completion:** Total Depth: 3425 Plug Back Total Depth: 3377 New Well _Re-Entry Workover Amount of Surface Pipe Set and Cemented at 927 SWD __ __SIOW ____Temp. Abd. Feet ENHR . SIGW Multiple Stage Cementing Collar Used? Yes No Other (Core, WSW, Expl., Cathodic, etc) If yes, show depth set _ If Workover/Re-entry: Old Well Info as follows: If Alternate II completion, cement circulated from..... Drilling Fluid Management Plan Original Comp. Date: Original Total Depth: (Data must be collected from the Reserve Pi Chloride content 76,000 __ Re-perf. .Conv. to Enhr./SWD Deepening ppm Fluid volume 400 Plug Back_ Plug Back Total Depth Dewatering method used Allow to dry, backfill Commingled Docket No. Location of fluid disposal if hauled offsite: **Dual Completion** Docket No. Operator Name:___ Other (SWD or Enhr.?) Docket No.: Lease Name: License No : 3/26/03 4/22/03 Date Reached TD Completion Date or Recompletion Date Recompletion Date ___ 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. KCC Office Use ONLY President 5/6/03 Date: **Letter of Confidentiality Attached** Subscribed and sworn to before me this 6th If Denied, Yes Date:_ Wireline Log Received **Geologist Report Received UIC Distribution**

Drv

Operator:_ Well Name:

3/17/03

Spud Date or

2003

KIMBERLY SPIVEY Notary Public, State of Texas My Commission Exp. 12-11-2004

CONFIDENTIAL

Side Two

ORIGINAL

Operator Name: Imp	erial American O	Il Corporation	Lea	Lease Name: Carrie Well #: 22-1						
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NSTRUCTIONS: Si ested, time tool oper emperature, fluid red Electric Wireline Log	n and closed, flowing covery, and flow rate	g and shut-in pres s if gas to surface	sures, whether test, along wit	shut-in pre	ssure reache	d static level, hydro	static pressu			
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Electric Log Run (Submit Copy)]No	Тор	eka		2684	-919		
List All E. Logs Run:				Lans	sing	KCC	2975	-1210		
Dual Induction	n, Neutron-De	nsity, Sonic,	Micro	Arbı	ickle M/	V 0 6 5003	3319	-1554		
						VFIDENTIAL	i.	**************************************		
			ASING RECORI		Name of the last o	uction, etc.				
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.) V	Veight os. / Ft.	Setting Depth	Type of Cement	# Sacjs Used	Type and Percent Additives		
Surface	12-1/4"	8-5/8"	23#		927	60/40 Poz	425	3% cc, 2% gel		
Production	7-7/8"	5-1/2"	15.5#	!	3424	ASC	200	2% gel		
		ADDI*	FIONAL CEMEN	ITING / SQI	JEEZE RECOF	RD				
Purpose: —— Perforate —— Protect Casing —— Plug Back TD —— Plug Off Zone	Depth Top Bottom	Type of Ceme	ent #Sad	cks Used		Type and F	Percent Additive	s		
Shots Per Foot		ON RECORD - Brid		pe		racture, Shot, Cement Amount and Kind of Ma		ord Depth		
4	Specify Footage of Each Interval Perforated 3188-91; 3132-37; 3092-98; 3072-76;3062-66;				Treat each zone with 250 gal MCA					
4	3048-52; 3022-30; 3003-07; 2975-78; 2950-56;						ga. 11107 t			
4	2904-08; 2894-9					KA	NSAS CORPC	TENED COMMISSIO		
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IED CEMENTING CO., INC. 13309

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