

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 # 32819
Name: Baird Oil Company LLC **KCC**
Address: PO Box 428
City/State/Zip: Logan, KS. 67646 **JAN 07 2004**
Purchaser: NCRA **CONFIDENTIAL**
Operator Contact Person: Jim R. Baird
Phone: (785) 689-7456
Contractor: Name: Murfin Drilling Co.
License: 30606 **RECEIVED**

Wellsite Geologist: Gary Gensch **JAN 12 2004**
Designate Type of Completion:
 New Well Re-Entry Workover **KCC WICHITA**
 Oil SWD SIOW 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. _____

<u>11/18/03</u>	<u>11/28/03</u>	<u>11/28/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23388-00-00
County: Rooks
210 ^W ^{SE} ^{SW} ^{SW} ₃₀ Sec. 30 Twp. 7S S. R. 20 East West
330' feet from (S) N (circle one) Line of Section
780' feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Benoit-Jones Well #: 1
Field Name: Wildcat
Producing Formation: Toronto-Kansas City
Elevation: Ground: 2009 Kelly Bushing: 2014
Total Depth: 3530 Plug Back Total Depth: 3511
Amount of Surface Pipe Set and Cemented at 214 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set DV Tool set at 1630 Feet
If Alternate II completion, cement circulated from 1630
feet depth to surface w/ 235 sx cmt.
ACT II WFM 12-28-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content: 1800 ppm Fluid volume: 400 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

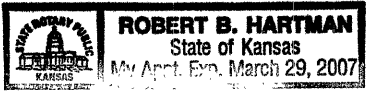
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Jim Baird
Title: President Date: 1/6/2004
Subscribed and sworn to before me this 6th day of JANUARY,
2004.
Notary Public: Robert B. Hartman
Date Commission Expires: 3/29/07

KCC Office Use ONLY

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



X

Operator Name: Baird Oil Company LLC Lease Name: Benoit-Jones Well #: 1
 Sec. 30 Twp. 7S S. R. 20 East West County: Rooks

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)
 List All E. Logs Run:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	1606	+408
Heebner	3205	-1191
Lansing	3242	-1228
B/KC	3442	-1428
Arbuckle	3515	-1501
RTD	3528	-1514

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 JAN 12 2004
 KCC WICHITA

CASING RECORD <input 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 pipe	13 1/4"	8 5/8	24#	214	common	150	2% Gel 3% CC
Production String	7 7/8	5 1/4	14#	3527	40/40, common, SMOC	475	2% Gel, 12 1/2# Gils, 18% Salt, 1/2% CFR3

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
2	3228-3234	500 gal 15% MCA +1500 Gal	15% NE
2	3242-3246	A/A	
2	3407-3410	A/A	
2	3427-3430	A/A	
2	3432-3434	A/A	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8	3508	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
1/1/2004		<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
	65	-	None		

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 _____

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JAN 12 2004
KCC WICHITA

BENOIT JONES #1
30-7S-20W
Drill Stem Tests

KCC
JAN 07 2004
CONFIDENTIAL

DST #1 (3214-3241) 30-30-30-45

IF: 275-704# ISIP: 1135#
FF: 730-947# FSIP: 1111#

Rec: 200' GIP
2,790 CGO 26 Grav.

DST #2 (3237-3266) 30-45-30-45

IF: 19-76# ISIP: 1139#
FF: 87-116# FSIP: 1112#

Rec: 430' GIP
155' CGO - 32 Grav.
155' Mud Cut Gassy Oil

DST #3 (3270-3294) 45-45-45-45

IF: 14-94# ISIP: 1057#
FF: 96-139# FSIP: 1006#

Rec: 107' GIP
263' MDY Wtr. with a show of oil on top.

DST #4 (3290-3310) 30-30-0-0

IF: 12-13# ISIP: 30#
FF: 12-13# FSIP: NA

Rec: 5' Mud.

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JAN 12 2004
KCC WICHITA

-2-

ORIGINAL

KCC

JAN 07 2004

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DST #5 (3306-3329)

45-45-45-45

IF: 14-107#

ISIP: 814#

FF: 109-157#

FSIP: 805#

Rec: 310' MDY Water with a show of oil on top

DST #6 (3327-3347)

30-45-30-45

IF: 30-163#

ISIP: 813#

FF: 169-273#

FSIP: 803#

Rec: 526' GIP

280' Clean Oil

36 Grav.

310' Water

DST #7 (3402-3445)

30-45-30-45

IF: 22-91#

ISIP: 989#

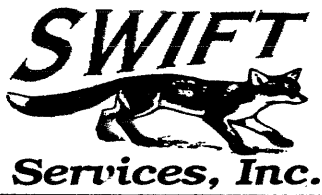
FF: 95-124#

FSIP: 921#

Rec: 278' GIP

30' CGO - 30 Grav.

248' Mud Cut Oil



CONFIDENTIAL

CHARGE TO: *Baird O.I. Co.*
 ADDRESS: _____
 CITY, STATE, ZIP CODE: _____

RECEIVED
 JAN 09 2004
 KCC WICHITA ORIGINAL
 TICKET NO 6223
 PAGE 1 OF 2

SERVICE LOCATIONS
 1. *Hwy, Ks*
 2. _____
 3. _____
 4. _____
 REFERRAL LOCATION

WELL/PROJECT NO. *#1*
 LEASE *Bennett-Jones*
 COUNTY/PARISH _____ STATE *Ks* CITY _____ DATE *11-27-03* OWNER *Some*

TICKET TYPE
 SERVICE
 SALES CONTRACTOR *Muel. Arls* RIG NAME/NO. _____ SHIPPED VIA *BIT* DELIVERED TO _____ ORDER NO. _____

WELL TYPE *Oil* WELL CATEGORY *Development* JOB PURPOSE *Cont. 5 1/2" Prod. Co.* WELL PERMIT NO. _____ WELL LOCATION _____

INVOICE INSTRUCTIONS _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF									
<i>575</i>		<i>1</i>			<i>MILEAGE #103</i>	<i>60</i>	<i>mi</i>			<i>2.50</i>	<i>150</i>	<i>64</i>	<i>18</i>
<i>579</i>		<i>1</i>			<i>Pump Service</i>	<i>1</i>	<i>ea</i>			<i>1500.00</i>	<i>1500</i>	<i>64</i>	<i>18</i>
<i>407</i>		<i>1</i>			<i>Insert Float Shoe</i>	<i>1</i>	<i>ea</i>	<i>5 1/2</i>	<i>in</i>	<i>230.00</i>	<i>230</i>	<i>64</i>	<i>18</i>
<i>408</i>		<i>1</i>			<i>D.U. Plug Set</i>	<i>1</i>	<i>ea</i>			<i>2150.00</i>	<i>2150</i>	<i>64</i>	<i>18</i>
<i>402</i>		<i>1</i>			<i>Centralizers</i>	<i>9</i>	<i>ea</i>			<i>44.00</i>	<i>396</i>	<i>64</i>	<i>18</i>
<i>403</i>		<i>1</i>			<i>Backho</i>	<i>1</i>	<i>ea</i>			<i>125.00</i>	<i>125</i>	<i>64</i>	<i>18</i>
<i>411</i>		<i>1</i>			<i>Scratchers</i>	<i>23</i>	<i>ea</i>			<i>30.00</i>	<i>690</i>	<i>64</i>	<i>18</i>
<i>284</i>		<i>+</i>			<i>Mod. T. Tech</i>	<i>500</i>	<i>gal</i>			<i>0.60</i>	<i>300</i>	<i>64</i>	<i>18</i>
<i>280</i>		<i>1</i>			<i>Flocheck-21</i>	<i>500</i>	<i>gal</i>			<i>1.50</i>	<i>750</i>	<i>64</i>	<i>18</i>
<i>221</i>		<i>1</i>			<i>KCL</i>	<i>2</i>	<i>gal</i>			<i>19.00</i>	<i>38</i>	<i>64</i>	<i>18</i>
		<i>1</i>			<i>See Continuation</i>						<i>6414</i>	<i>64</i>	<i>18</i>

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *[Signature]*
 DATE SIGNED _____ TIME SIGNED _____
 A.M.
 P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	TAX	TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				<i>12,443</i>		
WE UNDERSTOOD AND MET YOUR NEEDS?						
OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO					
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						

SWIFT OPERATOR *[Signature]* APPROVAL _____

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

Thank You!

CONFIDENTIAL



PO Box 466
Ness City, KS 67560
Off: 785-798-2300

TICKET CONTINUATION

RECEIVED
JAN 09 2004
KCC WICHITA

ORIGINAL
TICKET No. 6223

CUSTOMER Board Oil Co.	WELL	DATE 11-22-03	PAGE 2	OF 2
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PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE		AMOUNT		
		LOC	ACCT	DF											
326		1				60/40 Poz	40	SP			5	40	216	00	
325		1				Standard Cond.	200	SP			7	00	1400	00	
330		1				Sm OC	235	SP			9	75	2291	25	
283		1				Salt	1900	"			15		285	00	
285		1				CFR-1	100	"			2	75	275	00	
276		1				Mocole	109	"			90		98	00	
277		1				Gilsonite	500	"			30		150	00	
KCC JAN 07 2004 CONFIDENTIAL															
581		1				SERVICE CHARGE						1	00	475	00
583		1				MILEAGE CHARGE	TOTAL WEIGHT 48011	LOADED MILES 60					85	1224	29

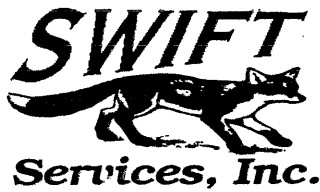
CONTINUATION TOTAL 6414 64

CUSTOMER *Beard O.I* WELL NO. LEASE JOB TYPE *2 Long String* TICKET NO. *6223*

CHART NO.	TIME	RATE (BPM)	VOLUME (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0430							on loc. Rig Logging down D.P. Scratches on 2" on J1. #2 3" on J1. #3, #4, #5, #6, #7, #8, #9 Cont. on #1, #2, #4, #6, #8, #11, #14, #44 Basket on #42
								RECEIVED JAN 09 2004 KCC WICHITA D.V. on #43 @ 1630'
	0810							Cog on Bottom Drop Beil Circulate + Reciprocate Cog.
	0930							Plug Mann Hole + Rest hole
	0945	6.5	20					Pump 20 ⁵⁰ 2% PVC Fluid 5 ⁵⁰ spacer
			5					18 ⁵⁰ Floccul-21 5 ⁵⁰ spacer Behind
			12					MIX 40 sh 60/40 scavenger
			10					MIX 200 sh sid. cut with Additives
			45					Wash out pump + line Displace shut off Plug 36 ⁵⁰ 1120 49.7 ⁵⁰ Mud 85.7 ⁵⁰ 100-0
	10:00							Plug down 1500pit holding Release press. Dined up Drop Opening Plug
	10:15		85.7				1500	Open D.V. 1100psf MIX 235 sh 5MOC 1/4" Flocc
	10:20							Finished mixing Return Closing Plug Displ. 39.2 ⁵⁰ 1120
	10:35						1100	Plug down 2,000pit holding Release press. D.V. closed Cir. 20 ⁵⁰ Mud. to pit wash and sand up trends Job Complete
	10:53							
	11:00		39.7				2000	

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*Thank You
Rogers*



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CHARGE TO: *Band Oil Co.* **KCC**
 ADDRESS: _____ **JAN 07 2004**
 CITY, STATE, ZIP CODE: _____ **CONFIDENTIAL**

RECEIVED
 JAN 09 2004
 ORIGINAL TICKET
 No. 5960
 KCC WICHITA

PAGE 1 OF 1

SERVICE LOCATIONS: 1. *Harjo KS* WELL/PROJECT NO. *1* LEASE *Benoit/Jones* COUNTY/PARISH *ROCKS* STATE *KS* CITY _____ DATE *11-19-03* OWNER *Same*

2. TICKET TYPE SERVICE SALES CONTRACTOR _____ RIG NAME/NO. *Murphy 16* SHIPPED VIA *105* DELIVERED TO *N.W. Webster* ORDER NO. _____

3. WELL TYPE *oil* WELL CATEGORY *Development* JOB PURPOSE *Surface* WELL PERMIT NO. _____ WELL LOCATION _____

4. REFERRAL LOCATION _____ INVOICE INSTRUCTIONS _____

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>					<i>MILEAGE</i>	<i>70</i>	<i>m</i>			<i>2.50</i>	<i>175.00</i>
<i>576</i>						<i>1</i>	<i>EA</i>	<i>221</i>	<i>FT</i>		<i>550.00</i>
<i>325</i>					<i>STD CMT</i>	<i>150</i>	<i>SKS</i>			<i>7</i>	<i>1050.00</i>
<i>279</i>					<i>GEL</i>	<i>3</i>	<i>SKS</i>			<i>11</i>	<i>33.00</i>
<i>278</i>					<i>Calcium Chloride</i>	<i>4</i>	<i>SKS</i>			<i>25</i>	<i>100.00</i>
<i>581</i>					<i>Bulk Service Chg</i>	<i>150</i>				<i>1.00</i>	<i>150.00</i>
<i>583</i>					<i>Drayage</i>	<i>515</i>	<i>20</i>	<i>T.M.</i>		<i>85</i>	<i>437.92</i>
<i>410</i>					<i>Top Ply</i>	<i>1</i>	<i>EA</i>	<i>28</i>	<i>IN</i>		<i>60.00</i>

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X
 DATE SIGNED *11-19-03* TIME SIGNED *7:00* A.M. P.M.

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				<i>2555.92</i>
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

