

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 # 3954

Name: Jaed Production Co., Inc.

Address: P.O. Box 902

City/State/Zip: Arkansas City, KS 67005

Purchaser: STG

Operator Contact Person: Jay Warren

Phone: (620) 442-0826

Contractor: Name: Berentz Drilling Co., Inc.

License: 5892

Wellsite Geologist: Edward Broyles

Designate Type of Completion:

New Well  Re-Entry  Workover

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. \_\_\_\_\_

1-10-03 1-21-03 2-10-03

Spud Date or 1-10-03 Date Reached TD 1-21-03 Completion Date or 2-10-03 Recompletion Date

API No. 15 - 191-22388-0000

County: Sumner

70' N - SW - SE - NE Sec. 33 Twp. 34 S. R. 2  East  West

3040 feet from  N (circle one) Line of Section

990 feet from  W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE  SE NW SW

Lease Name: Scott Well #: 2

Field Name: Padgett

Producing Formation: Kansas City

Elevation: Ground: 1198 Kelly Bushing: 1203

Total Depth: 3770 Plug Back Total Depth: \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 278 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.

ALT I WITH - 12-26-06

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content 2200 ppm Fluid volume 300 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: Jay Warren

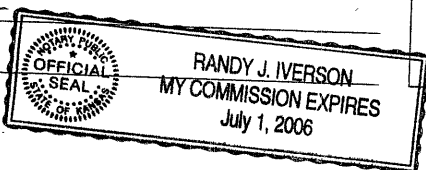
Title: \_\_\_\_\_ Date: 4/28/03

Subscribed and sworn to before me this 28<sup>th</sup> day of April

2003

Notary Public: Randy J. Iverson

Date Commission Expires: 7-1-06



**KCC Office Use ONLY**

Letter of Confidentiality Attached

If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

X

Operator Name: Jaed Production Co., Inc. Lease Name: Scott Well #: 2  
 Sec. 33 Twp. 34 S. R. 2  East  West County: Sumner

**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  
 Kansas City 3036  
 Miss. 3500  
 Wilcox 3717

List All E. Logs Run:  
 Compensated Density  
 Dual Induction  
 Cement Bond Log

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	# Sacks Used	Type and Percent Additives
Surface	12 1/4	8 5/8	24 lbs	257	owc	150	3% cc
Long string	7 7/8	5 1/2	15 lbs	3245	Common Owc	150	3% 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
2	3040 to 3044	500 gallon 7% acid	3040

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8	2990		<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
2/20/03	<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
	8	0	20 barrels	50%	38

Disposition of Gas:  Vented  Sold  Used on Lease (If vented, Sumit ACO-18.)  
 METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  
 Production Interval:  Other (Specify)

**CONFIDENTIAL**

KCC  
APR 28 2003

RECEIVED

ORIGINAL

CONSOLIDATED OIL WELL SERVICES, INC. **CONFIDENTIAL**  
211 W. 14TH STREET, CHANUTE, KS 66720  
316-431-9210 OR 800-467-8676

MAY 01 2003  
KCC WICHITA

TICKET NUMBER **21889**  
LOCATION Biville  
FOREMAN [Signature]

**TREATMENT REPORT**

DATE	CUSTOMER ACCT.#	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
1-21-03	4298	Scott #2		33	34	2	Sumner, KS	
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE				DISTANCE TO LOCATION				
ZIP CODE				TIME LEFT LOCATION				
TIME ARRIVED ON LOCATION								

**WELL DATA**

HOLE SIZE	7 7/8
TOTAL DEPTH	3770'
CASING SIZE	5 1/2
CASING DEPTH	3245'
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

**TYPE OF TREATMENT**

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

**PRESSURE LIMITATIONS**

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB

**JOB SUMMARY**

DESCRIPTION OF JOB EVENTS est. circ - run 25 BBL flush ahead -  
run 75 st STR 1/4" # P/S then 75 st OWC w/ 1/4" # P/S -  
washed up line + pump - dropped plug - displaced to bottom  
w/ 77 1/4 BBL + set - shut in w/ 800# ON CASING per Jay Warren -

**PRESSURE SUMMARY**

BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

**TREATMENT RATE**

BREAKDOWN BPM
INITIAL BPM
FINAL BPM
MINIMUM BPM
MAXIMUM BPM
AVERAGE BPM

AUTHORIZATION TO PROCEED

TITLE

DATE

ALL THE TERMS AND CONDITIONS STATED ON THE REVERSE SIDE ARE INCORPORATED AS PART OF THIS SALE.

CONFIDENTIAL

KCC

ORIGINAL

APR 28 2003

CONFIDENTIAL

*Tg 289  
Shawn 405*

CONSOLIDATED OIL WELL SERVICES, INC.  
211 W. 14TH STREET, CHANUTE, KS 66720  
316-431-9210 OR 800-467-8676

RECEIVED 21819  
TICKET NUMBER  
LOCATION *Blville*  
2003  
KOREMAN  
KCC WICHITA

TREATMENT REPORT

DATE <i>1-11-03</i>	CUSTOMER ACCT # <i>4298</i>	WELL NAME <i>Scott #2</i>	QTR/QTR	SECTION <i>33</i>	TWP <i>34</i>	RGE <i>2</i>	COUNTY <i>Sumner</i>	FORMATION
CHARGE TO <i>JAED</i>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE				DISTANCE TO LOCATION				
ZIP CODE				TIME LEFT LOCATION				
TIME ARRIVED ON LOCATION								

WELL DATA

HOLE SIZE	<i>12 1/4</i>
TOTAL DEPTH	<i>270'</i>
CASING SIZE	<i>8 1/8</i>
CASING DEPTH	<i>257'</i>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT

<input checked="" type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB

JOB SUMMARY

DESCRIPTION OF JOB EVENTS *est. circ. - ran 150 sx 3% calcium cement w/444 displaced to 237' w/15 1/2 BBL - shut in -*

PRESSURE SUMMARY

BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi

TREATMENT RATE

BREAKDOWN BPM
INITIAL BPM
FINAL BPM
MINIMUM BPM
MAXIMUM BPM
AVERAGE BPM