

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5003 **RECEIVED**
Name: McCoy Petroleum Corporation
Address: 8080 E Central, Suite 300 **APR 26 2004**
City/State/Zip: Wichita, KS 67206 **KCC WICHITA**
Purchaser: _____
Operator Contact Person: Scott Hampel
Phone: (316) 636-2737
Contractor: Name: Sterling Drilling Co.
License: 5142
Wellsite Geologist: Tim Lauer

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. _____
3/10/04 03/19/04 NA
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-135-24263-00-00
County: Ness
C W/2 SW Sec. 2 Twp. 19 S. R. 24 East West
1200 ~~1249~~ feet from S / N (circle one) Line of Section
4654 ~~781~~ feet from E / W (circle one) Line of Section
KCC GPS
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Pavlu 'A' Well #: 1-2
Field Name: Wildcat
Producing Formation: _____
Elevation: Ground: 2304' Kelly Bushing: 2313'
Total Depth: 4352' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 212 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
(Data must be collected from the Reserve Pit) **ACT II P&A WITH 2-6-07**
Chloride content 30,000 ppm Fluid volume 800 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: Scott Hampel
Title: Engineering/Production Mgr. Date: 4/20/04
Subscribed and sworn to before me this 20th day of April

20 04
Notary Public: Susan Brady
Date Commission Expires: 11/4/07
SUSAN BRADY
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp _____

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

✓

X

Operator Name: McCoy Petroleum Corp. Lease Name: Pavlu ' A' Well #: 1-2
 Sec 2 Twp 19 S. R. 24 East West County: Ness

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: Dual Induction, Neutron Density
with bottom hole gamma

Log Formation (Top), Depth and Datum		Sample
Name	Top	Datum
Anhydrite 1565 (+748)		Ft. Scott 4240 (-1927)
Heebner 3704 (-1391)		Cherokee 4264 (-1951)
Lansing 3747 (-1434)		Mississippian 4336 (-2023)
Stark 4018 (-1705)		RTD 4352 (-2039)
Hushpuckney 4045 (-1732)		LTD 4358 (-2045)
Pawnee 4156 (-1843)		

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"	23#	212'	Common	150	2% gel, 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

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method	<input type="checkbox"/> Flowing <input 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

Disposition of Gas Vented Sold Used on Lease (If vented, Submit A CO- 18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

RECEIVED
APR 26 2004

KCC WICHITA



CHARGE TO: MCCOY PETROLEUM
ADDRESS
CITY, STATE, ZIP CODE

RECEIVED
APR 26 2004
KCC WICHITA

TICKET No 6612

PAGE 1	OF 1
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SERVICE LOCATIONS NESS CITY KS	WELL/PROJECT NO. 1-2	LEASE PAULU "A"	COUNTY/PARISH NESS	STATE KS	CITY	DATE 3-10-04	OWNER SAME
TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR STERLING DRILLING # 4		RIG NAME/NO.	SHIPPED VIA CT	DELIVERED TO LOUISIANA	ORDER NO.	
WELL TYPE OIL	WELL CATEGORY DEVELOPMENT	JOB PURPOSE 8 5/8" SURFACE	WELL PERMIT NO.	WELL LOCATION NESS CITY KS - 2 1/2 W, 1 1/4 S			
REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
575		1			MILEAGE # 104		5	MI		2.50	12.50
576		1			PUMP SERVICE		1	JOBS	211	550.00	550.00
410		1			TOP PUG		1	KA	8-7/8"	60.00	60.00
325		1			STANDARD CEMENT		150	SKS		7.00	1050.00
278		1			CALCIUM CHLORIDE		4	SKS		25.00	100.00
279		1			BENTONITE GEL		3	SKS		11.00	33.00
581		1			SERVICE CHARGE CEMENT		150	SKS		1.00	150.00
582		1			MINIMUM DRILLAGE		14720	LBS	36.8	100.00	100.00

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

DATE SIGNED: 3-10-04
TIME SIGNED: 1800
SIGNATURE: [Signature]

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	2055.50
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?					
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	65.88
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL	2121.38
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

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

SWIFT OPERATOR: WAVE WASSON APPROVAL: [Signature]

Thank You!

