

RELEASED FROM CONFIDENTIAL WELL COMPLETION FORM

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1 September 1999 Form Must Be Typed

ORIGINAL

Operator: License # 32902 Name: Hopewell Operating, Inc. Address: 5307 E. Mockingbird Ln., Ste. 906 City/State/Zip: Dallas, TX 75206 Purchaser: Plains Marketing Operator Contact Person: Carol Shiels Phone: (214) 826-5213 Contractor: Name: McPherson Drilling License: 5675 Wellsite Geologist: Carol M. Shiels

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Designate Type of Completion:

- New Well Re-Entry Workover Oil SWD SLOW 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.

5-06-03 Spud Date or Recompletion Date 5-07-03 Date Reached TD 7-29-03 Completion Date or Recompletion Date

API No. 15 - 001-29003 - 00-00 County: Allen NW_NW_NW_ Sec. 9 Twp. 25 S. R. 18 East West 4880 feet from S N (circle one) Line of Section 4950 feet from E W (circle one) Line of Section

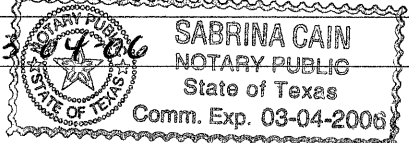
Footages Calculated from Nearest Outside Section Corner: (circle one) NE SE NW SW Lease Name: Larson Well #: R-1 Field Name: Iola Producing Formation: Bartlesville Elevation: Ground: 942.5 Kelly Bushing: 942.5 Total Depth: 1045 Plug Back Total Depth: 1040 Amount of Surface Pipe Set and Cemented at 2843 Feet Multiple Stage Cementing Collar Used? Yes No If yes, show depth set Feet If Alternate II completion, cement circulated from 1045 feet depth to surface w/ 214 sx cmt. ALT II WAM 12-26-08

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Chloride content 800 ppm Fluid volume 600 bbls Dewatering method used backfill and dewater 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: Marie Lewis Title: Geological Assistant Date: 8/25/03 Subscribed and sworn to before me this 25th day of August 20 03 Notary Public: Sabrina Cain Date Commission Expires: 03-04-06



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

ORIGINAL

Operator Name: Hopewell Operating, Inc. Lease Name: Larson Well #: R-1
 Sec. 9 Twp. 25 S. R. 18 East West County: Allen

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction & Density-Neutron-GR	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Fort Scott 592 GL Summit 614 GL Mississippian 1016 GL <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED AUG 28 2003 KCC WIGHITA </div>
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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	# Sacs Used	Type and Percent Additives
surface casing	11"	8 5/8"	20#	34' 43"	portland	12	
production	7 7/8"	5 1/2"	17#	1045'	poz 50/50	214	

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
2 spf	875-895'	F/2000# sand	975'
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TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2 3/8"	900'				
Date of First, Resumerd Production, SWD or Enhr.			Producing Method				
8/25/03			<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		
	2	0	10		20		

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

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

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ORIGINAL

TICKET NUMBER 28959

LOCATION

FOREMAN *Dwayne*

TREATMENT REPORT

R-1

DATE <i>5/8/03</i>	CUSTOMER # <i>3557</i>	WELL NAME <i>Larson</i>	FORMATION
SECTION <i>9</i>	TOWNSHIP <i>25</i>	RANGE <i>15</i>	COUNTY
CUSTOMER <i>Hercwell Operating Inc.</i>			
MAILING ADDRESS <i>5307 E. Mockingbird Ln St 900</i>			
CITY <i>Dallas</i>			
STATE <i>TX</i>		ZIP CODE <i>75206</i>	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
<i>755</i>	<i>Craig</i>		
<i>103</i>	<i>David</i>		
<i>296</i>	<i>Danny</i>		
<i>139</i>	<i>Mal</i>		

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"/> MIS. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

WELL DATA

HOLE SIZE <i>8"</i>	PACKER DEPTH
TOTAL DEPTH <i>1046</i>	PERFORATIONS
	SHOTS/FT
CASING SIZE <i>5 1/2</i>	OPEN HOLE
CASING DEPTH <i>1045</i>	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

INSTRUCTION PRIOR TO JOB *Cement Long String Pump 2 SK Prem Gel Followed By 18 Bull Dye Then 2 1/4 SK Cement to get Dye Back Stop and Wash out Pump then Pump Plug to Bottom and get Flow Shoe*

AUTHORIZATION TO PROCEED

TITLE

DATE

TIME AM/PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
							BREAKDOWN PRESSURE
							DISPLACEMENT
							MIX PRESSURE
							MIN PRESSURE
							ISIP <i>5750</i>
							15 MIN.
							MAX RATE
							MIN RATE

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TICKET NUMBER 20302



211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION _____

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
5/8/03	3557	Lanson A-1		9	25	15	AL	
CHARGE TO Hope Well Operating Inc				OWNER				
MAILING ADDRESS 5307E Mockingbird Ln # 906				OPERATOR				
CITY & STATE Dallas TX 75206				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1 Well	PUMP CHARGE Cement Pump		
1118	6 SK	Prem Gel 4 In head		
		2 Ahead of Job		
1111	10 SK 500#s	Salt		
1110	20 SK	Gilsonite		
1107	2 SK	CelloFlake		
4405	1	5 1/2 RUBBER Plug		
	9240 gals			
1123	220 Bill	City water		
		BLENDING & HANDLING		
5407	30 mi	TON-MILES Cement Delivery		
		STAND BY TIME		
		MILEAGE		
5501	10 hr	WATER TRANSPORTS 2 Trucks 5 hr Each		
		VACUUM TRUCKS		
		FRAC SAND		
1124	214	CEMENT 50/50 P02 Mix		
			SALES TAX	

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ESTIMATED TOTAL

CUSTOMER or AGENTS SIGNATURE _____ CIS FOREMAN DeWayne

CUSTOMER or AGENT (PLEASE PRINT) _____ DATE _____

183958

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ORIGINAL

CONSOLIDATED OIL WELL SERVICES, INC.

211 W. 14TH STREET, CHANUTE, KS 66720

620-431-9210 OR 800-467-8676

TICKET NUMBER 28955

LOCATION

FOREMAN

Dwayne

TREATMENT REPORT

A-1

DATE <i>5/6/03</i>	CUSTOMER # <i>3557</i>	WELL NAME <i>Lorson</i>	FORMATION
SECTION <i>9</i>	TOWNSHIP <i>25</i>	RANGE <i>15</i>	COUNTY <i>AI</i>
CUSTOMER <i>Hopewell operating Trac</i>			
MAILING ADDRESS <i>5307 E. Mockingbird Ln St 906</i>			
CITY <i>Dallas</i>			
STATE <i>TX</i>		ZIP CODE <i>75206</i>	
TIME ARRIVED ON LOCATION <i>3:20</i>			

TRUCK #	DRIVER	TRUCK #	DRIVER
<i>128</i>	<i>Craig</i>		
<i>370</i>	<i>Marty</i>		
<i>122</i>	<i>David</i>		

WELL DATA	
HOLE SIZE <i>11"</i>	PACKER DEPTH
TOTAL DEPTH <i>44'</i>	PERFORATIONS
	SHOTS/FT
CASING SIZE <i>8 5/8"</i>	OPEN HOLE
CASING DEPTH <i>43'</i>	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA <i>Cement Pump</i>	

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"/> MISP. PUMP	<input type="checkbox"/>
<input type="checkbox"/> OTHER	<input type="checkbox"/>

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB

Cement Surface Pipe

AUTHORIZATION TO PROCEED

TITLE

DATE

TIME AM/PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
<i>11:20</i>	<i>1</i>						BREAKDOWN PRESSURE
							DISPLACEMENT
							MIX PRESSURE
							MIN PRESSURE
							ISIP
							15 MIN.
							MAX RATE

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11/24