

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM - AMENDED

WELL HISTORY DESCRIPTION OF WELL & LEASE  
**CONFIDENTIAL**

**ORIGINAL**

Operator: License # 33152  
Name: Shawnee Oil & Gas, LLC  
Address: 1900 Shawnee Mission Pkwy  
City/State/Zip: Mission Woods, KS 66205  
Purchaser: Colt Pipeline, LLC  
Operator Contact Person: Jeff Mohajir  
Phone: (913) 748-3987  
Contractor: Name: Layne Christensen Canada, Ltd.  
License: 32999  
Wellsite Geologist: Patrick Morgan  
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. \_\_\_\_\_  
April 18, 2003 April 19, 2003 \* August 25, 2003  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

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FEB 26 2004

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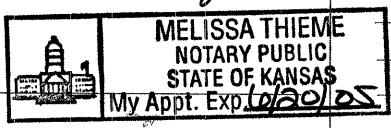
API No. 15 - 125-30241 0000  
County: Montgomery  
NE SW Sec. 11 Twp. 32 S. R. 16  East  West  
2113 feet from  N (circle one) Line of Section  
1501 feet from E /  W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW  SW  
Lease Name: Romans Well #: 11-11  
Field Name: Brewster  
Producing Formation: Cherokee Coals  
Elevation: Ground: 840 Kelly Bushing: 843  
Total Depth: 1057 Plug Back Total Depth: 1019  
Amount of Surface Pipe Set and Cemented at 42 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from 1051  
feet depth to Surface w/ 140 sx cmt.  
ALT II EIH 3-20-06

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content N/A ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used N/A - Air Drilled  
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: [Signature] Date: 2/23/04  
Title: Agent  
Subscribed and sworn to before me this 23rd day of February, 2004.  
Notary Public: Melissa Thieme  
Date Commission Expires: 6/20/05



**KCC Office Use ONLY**

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

✓

# CONFIDENTIAL

Side Two

# ORIGINAL

Operator Name: Shawnee Oil & Gas, LLC. Lease Name: Romans Well #: 11-11  
 Sec. 11 Twp. 32 S. R. 16  East  West County: Montgomery

**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  
 Pawnee Lime 525 GL 318  
 Excello Shale 671 GL 172  
 V Shale 732 GL 111  
 Weir - Pitt Coal 851 GL -8  
 Rowe 1020 GL -177

List All E. Logs Run:  
 Compensated Density Neutron  
 Dual Induction

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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	# Sacjs Used	Type and Percent Additives
Surface	11 1/4	8.65	23	42	Portland	25	cacl2 3%
Casing	7 7/8	5.5	15.5	1051	Thixotropic + Gilsomite	140	

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 7/8	1060		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
10/13/03			<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
		3	7		

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 \_\_\_\_\_