

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

Operator: License # 5363
Name: BEREXCO, INC.
Address: 2020 N BRAMBLEWOOD
City/State/Zip: WICHITA, KS 67206
Purchaser: CENTRAL CRUDE
Operator Contact Person: GARY MISAK
Phone: (316) 265-3511
Contractor: Name: BEREXCO, INC.
License: _____

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Wellsite Geologist: _____
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: SABINE PRODUCTION COMPANY

Well Name: LEE 1-17
Original Comp. Date: 7/83 Original Total Depth: 4800
____ 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. E-26927

7-30-03 8-16-03
07/30/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

KCC WTM-0950

API No. 15 - 007-21621-00-02
County: BARBER
SE NE SW NE Sec. 17 Twp. 30 S. R. 15 East West
1920 feet from S N (circle one) Line of Section
1580 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: LEE Well #: 1-17

Field Name: TURKEY CREEK NORTH
Producing Formation: CHEROKEE, VIOLA
Elevation: Ground: 1886 Kelly Bushing: 1891
Total Depth: 4795 Plug Back Total Depth: 4720
Amount of Surface Pipe Set and Cemented at 1035 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 WTM 12-26-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
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: Gary Misak
Title: _____ Date: 8-20-03

Subscribed and sworn to before me this 20th day of August, 2003

Notary Public: Diana E Plotner
Date Commission Expires: Aug 10, 2007
DIANA E PLOTNER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 8-10-07

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

Operator Name: BEREXCO, INC. Lease Name: LEE Well #: 1-17
 Sec. 17 Twp. 30 S. R. 15 East West County: BARBER

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:
 N/A

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

N/A

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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	# Sacks Used	Type and Percent Additives
SURFACE	12 1/4	8 5/8	24	1035	CLASS H Lite	250 450	2% CC 3% CC
PRODUCTION	7 7/8	4 1/2	11.6	4795	REC	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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	Drilled out CIBP at 4566 & 4630 new PBSD 4720		
	Commingle old perms Cherokee perms 4502-10 & 4520-34, Viola perms 4576-84 & 4646-53		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	4415	4415	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
08/16/03	<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
			50 - VAC		

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 4502-4653

Production Interval Other (Specify) _____