

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

CONFIDENTIAL

Operator: License # 5003
Name: McCoy Petroleum Corporation
Address: 8080 E Central, Suite 300
City/State/Zip: Wichita, KS 67206
Purchaser: Oil - Semcrude Gas-Ks Gas Service
Operator Contact Person: Scott Hampel
Phone: (316) 636-2737
Contractor: Name: Sterling Drilling Co.
License: 5142
Wellsite Geologist: Dave Clothier

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. _____
09-26-04 10-02-04 10-18-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 095-21912-00-00
County: Kingman
NW NE SW Sec. 11 Twp. 30 S. R. 9 East West
2310 feet from S N (circle one) Line of Section
1650 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE SW NW
Lease Name: Schwartz A Well #: 4-11
Field Name: Spivey Grabs
Producing Formation: Mississippian
Elevation: Ground: 1674' Kelly Bushing: 1683'
Total Depth: 4395' Plug Back Total Depth: 4254'
Amount of Surface Pipe Set and Cemented at 242 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)

Chloride content 13,000 ppm Fluid volume 1,500 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite:
Operator Name: Messenger Petroleum
Lease Name: Nicholas SWD License No.: 4706
Quarter _____ Sec. 20 Twp. 30 S. R. 8 East West
County: Kingman Docket No.: D-25,703

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

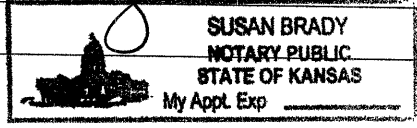
Title: Engineering/Production Mgr. Date: 11-24-04

Subscribed and sworn to before me this 24th day of November,

20 04

Notary Public: Susan Brady

Date Commission Expires: 11-4-07



KCC Office Use ONLY

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

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NOV 29 2004
KCC WICHITA

Operator Name: McCoy Petroleum Corporation Lease Name: Schwartz A Well #: 4-11
 Sec 11 Twp 30 S. R. 9 East West County: Kingman

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach additional Sheets) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit- Copy) List All E. Logs Run: <u>No open hole logs run.</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample Name Top Datum <hr/> Heebner 3343 (-1710) <hr/> Lansing 3615 (-1932) <hr/> Stark Shale 3986 (-2303) <hr/> Cherokee Shale 4217 (-2534) <hr/> Mississippian 4278 (-2595) <hr/> RTD 4295 (-2612)
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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	# Sacks Used	Type and Percent Additives
Surface casing	12 1/4"	8 5/8"	28#	242'	60/40 Pozmix	250	2%gel, 3% CC
Production casing	7-7/8"	4 1/2"	10.5#	4294'	AA-2	125	10% salt 5#gilsonite/sack

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
4	4284 - 4294 Mississippian	500 gal 10% MIRA	

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TUBING RECORD		Size <u>2-7/8"</u>	Set At <u>4252'</u>	Packer At <u>4252'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>10-19-04</u>		Producing Method <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. <u>0</u>	Gas Mcf <u>200</u>	Water Bbls. <u>0</u>	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 _____



INVOICE NO.		Subject to Correction			FIELD ORDER 8185	
Date	9-26-04	Lease	Schantz	Well #	4-11	Legal
Customer ID		County	Kingman	State	KS	Station
Mc Coy Petroleum Corp		Depth	Formation	TP=241'28 pps		Shoe joint
		Casing	8 5/8	Casing Depth	241	TD
		Customer Representative			Treater	
		Lanny Saloga			P. Scot	
				Job Type		
				Surface brw well		

CHARGE

AFE Number	PO Number
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Materials Received by **X** *Lanny Saloga*

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D203	250ski	60-40 doz Common	-			
C310	645 Lbs	Calcium Chloride	-			
C194	54 Lbs	Cellflake	-			
F163	1 ea	Top Wood Plug 8 5/8	-			
F100	1 ea	Trk mi lway 45 mi				
F107	250ski	Cmt Serv Chg				
F104	484 tm	Bulk Delv Chg				
R200	1 ea	Pump Chrg				
E101	1 ea	Pickup mi lway 45 mi				
R701	1 ea	Cmt Head Rental				
		UNITS	MILES			
		TONS	MILES			
		EA.	PUMP CHARGE			
				Discounted Price =	3773.72	

10244 NE Hiway 61 · P.O. Box 8613 · Pratt, KS 67124-8613 · Phone (620) 672-1201 · Fax (620) 672-5383 TOTAL

