

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE

Operator: License # 32198  
Name: PETROSANTANDER (USA) INC  
Address: 6363 WOODWAY suite 350  
City: HOUSTON  
State/Zip: TEXAS 77057  
Purchaser: NA  
Operator Contact Name: JASON SIZEMORE  
Phone: (713) 784-8700  
Contractor: Name: CHEYENNE DRILLING  
License: 5382  
Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  Plug Abd  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: PETROSANTANDER (USA) INC  
Well Name: LESLIE 2  
Original Comp. Date 12/21/55 Original TD 5835'  
 Deepening  Re-perf.  Conv. to Enhr/SWD  
 Plug Back  PBTB  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_  
04/13/01 04/14/01 06/05/01  
Spud Date or Date Reached TD Completion Date or Recompletion Date

API NO. 15- 119-10027 ~~00-01~~  
County MEADE  
- C - SE - NE Sec. 3 Twp. 33S Rge. 30 X W  
1996 Feet from N (circle one) Line of Section  
666 Feet from E (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)  
Lease Name STEVENS (MORROW) UNIT Well # SMU 308  
Field Name STEVENS  
Producing Formation MORROW  
Elevation: Ground 2724' KB 2734'  
Total Depth 5835' PBTB 5788'  
Amount of Surface Pipe Set and Cemented at 1567' 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) *ALT I E/H 10-20-03*

Chloride content \_\_\_\_\_ ppm Fluid Volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_  
Location of fluid disposal if hauled offsite: *JUL 6 2001*  
Operator Name \_\_\_\_\_  
Lease Name \_\_\_\_\_  
Quarter Sec. Twp. S Rng. E/W  
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 on 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]  
Title Vice-President, Operations Date 07/02/01  
Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2001.  
Notary Public \_\_\_\_\_  
Date Commission Expires \_\_\_\_\_

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Geologist Report Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)

Operator Name PETROSANTANDER (USA) INC Lease Name STEVENS (Morrow) UNIT Well # SMU 308

Sec. 3 Twp. 33S Rge. 30  East  West

County MEADE

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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

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

CASING RECORD

New  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
Production/exist	none/existing	5-1/2"	15.5#	5822'		200	
Production/new	none/existing	5-1/2"	15.5#	2864'	set w/casing	patch	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2935-3677'	Class A / common	100 / 250	2% cc / -

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
		RECEIVED KANSAS CORPORATION COMMISSION	
		JUL 6 2001	

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

Date of First, Resumed Production, SWD or Inj . Producing Method  Flowing  Pumping  Gas Lift  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 ACO-18.)

METHOD OF COMPLETION  
 Open Hole  Perf.  Dually Comp.  Commingled  
 Other (Specify) Shut In Well

Production Interval \_\_\_\_\_

# ALLIED CEMENTING CO., INC.

7608

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT  
Med Lodge

DATE <u>5-31-01</u>	SEC.	TWP. <u>32S</u>	RANGE <u>30W</u>	CALLED OUT <u>6:00 AM</u>	ON LOCATION <u>9:30 AM</u>	JOB START <u>10:15 AM</u>	JOB FINISH <u>2:00 PM</u>
LEASE <u>SMU</u>	WELL # <u>308</u>	LOCATION <u>Plains 32S 4/5</u>		COUNTY <u>Meade</u>	STATE <u>Ks</u>		

CONTRACTOR Eagle Well Service  
 TYPE OF JOB Squeeze  
 HOLE SIZE 17 7/8 T.D.  
 CASING SIZE 5 1/2 x 15.5 DEPTH  
 TUBING SIZE 2 3/8 DEPTH 2781  
 DRILL PIPE DEPTH  
 TOOL Packer DEPTH 2781  
 PRES. MAX MINIMUM  
 MEAS. LINE SHOE JOINT  
 CEMENT LEFT IN CSG.  
 PERFS. 2935 - 3677  
 DISPLACEMENT 175 BBLs Fresh H<sub>2</sub>O

OWNER Petro santander  
 CEMENT  
 AMOUNT ORDERED 250 class A neat  
100 sx class A 2% cc

EQUIPMENT  
 PUMP TRUCK CEMENTER Justin Hart  
 # 345 HELPER Mark Brungardt  
 BULK TRUCK  
 # 353 DRIVER Jason Tritt  
 BULK TRUCK  
 # 240 DRIVER Troy Brian

COMMON	<u>350</u>	@	<u>7.85</u>	<u>2747.50</u>
POZMIX		@		
GEL		@		
CHLORIDE	<u>2</u>	@	<u>30.00</u>	<u>60.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>352</u>	@	<u>1.10</u>	<u>387.20</u>
MILEAGE	<u>352 x 50</u>		<u>.04</u>	<u>704.00</u>

RECEIVED  
KANSAS CORPORATION COMMISSION

TOTAL 3898.20

JUL 6 2001 SERVICE

REMARKS:

Back side loaded Press to 500#  
load tubing 95 BBL Take Inject Rate  
4 BBL @ 1350# Pump 250 sx A neat @  
15.6# 100 sx A 2% cc @ 15.6# Disp on  
Vacuum 15 BBLs shutin 5 min 1 BBL to 16  
shut down 15 min @ 17 BBLs Packer clear  
1140 Pump 1/2 BBL 500# Release Packer  
Reverse Out

DEPTH OF JOB DIVISION	<u>3677</u>			
PUMP TRUCK CHARGE				<u>1130.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>20</u>	@	<u>3.00</u>	<u>60.00</u>
PLUG		@		
<u>Squeeze Manifold</u>		@	<u>75.00</u>	<u>75.00</u>

TOTAL 6265.00

CHARGE TO: Petro santander USA  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL \_\_\_\_\_

TAX 33.47  
 TOTAL CHARGE 5494.17  
 DISCOUNT 511.37 IF PAID IN 30 DAYS  
\$ 4977.80

SIGNATURE Blae Gomez

PRINTED NAME

To Allied Cementing Co., Inc.  
 You are hereby requested to rent cer... ing equipment  
 and furnish cementer and helper to assist owner or  
 contractor to do work as is listed. The above work was  
 done to satisfaction and supervision... wner agent or  
 contractor. I have read & understand the "TERMS AND  
 CONDITIONS" listed on the reverse side.