

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6141
Name: Coronado Oil & Gas, Inc.
Address: P.O. Box 1285
City/State/Zip: Great Bend, Kansas 67530
Purchaser: _____
Operator Contact Person: Steve Bodine
Phone: (620) 792-6702
Contractor: Name: Vonfeldt Drilling, Inc.
License: 9431

Wellsite Geologist: Jim Musgrove
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. _____

<u>7-15-2004</u>	<u>7-21-2004</u>	<u>7-21-2004</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 159-22424-0000
County: Rice
 NW NE NE Sec. 14 Twp. 18 S. R. 7 East West
4950 feet from S N (circle one) Line of Section
990 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Behnke C Well #: 3
Field Name: Crawford

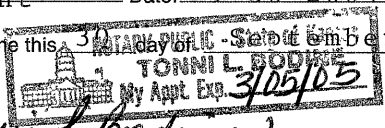
Producing Formation: Misener
Elevation: Ground: 1670 Kelly Bushing: 1675
Total Depth: 3300 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 218 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to ALT I WITHM 2-12-07 w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 23000 ppm Fluid volume 1200 bbls
Dewatering method used Allow to dry and backfill
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: Steve Bodine
Title: Production Superintendent Date: 9-30-2004
Subscribed and sworn to before me this 3 day of September,
20 04.
Notary Public: Tonni L. Bodine
Date Commission Expires: March 5, 2005



KCC Office Use ONLY

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

ALLIED CEMENTING CO., INC. 13010

Federal Tax I.D.# 48-0727860

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

SERVICE POINT:

Great Bend

DATE <u>7.15.04</u>	SEC. <u>14</u>	TWP. <u>17</u>	RANGE <u>7</u>	CALLED OUT <u>10:00 AM</u>	ON LOCATION <u>11:30 AM</u>	JOB START <u>12:45 PM</u>	JOB FINISH <u>1:30 PM</u>
LEASEE <u>phyc</u>		WELL # <u>2</u>		LOCATION <u>Hansen 4 sec 1 north</u>		COUNTY <u>Rice</u>	STATE <u>Kansas</u>
OLD OR NEW (Circle one) <u>NEW</u>				<u>2 sec 1 north 1/2 sec</u>			

CONTRACTOR Vandeldt
 TYPE OF JOB Service
 HOLE SIZE 12 1/4 T.D. 218'
 CASING SIZE 8 5/8 DEPTH 218'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15'
 PERFS. _____
 DISPLACEMENT 12.6 cu ft

OWNER Coronado
 CEMENT
 AMOUNT ORDERED 150 cu Common
30% CC 27% GEL

EQUIPMENT
U.B.
 PUMP TRUCK CEMENTER 222 Drilling
 # 181 HELPER Don Demand
 BULK TRUCK
 # 341 DRIVER Steve Turley
 BULK TRUCK
 # _____ DRIVER _____

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE SEP 3 @ 2004
 _____ @ _____
CONFIDENTIAL @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____

REMARKS:

Run pipe 28" casing to bottom
Circulate with rig mud
Drop gel pump bit & mixed 150 cu
common 35% cc 27% gel shut down
change address over volume 8 5/8 TWP
& plug down 8 5/8 casing with 12" 8-1
plug bit. Cement did circulate.

SERVICE

DEPTH OF JOB 218'
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG 1 8 5/8 TWP @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: Coronado
 STREET P.O. Box 1285
 CITY Great Bend STATE Ks. ZIP 67530

FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

THANK YOU!

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing 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 of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TOTAL _____
 TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

X Steve Rodine
 PRINTED NAME

RECEIVED
 OCT 01 2004
 KCC WICHITA