

KANSAS CORPORATION COMMISSION  
 OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
 WELL HISTORY DESCRIPTION OF WELL & LEASE

**CONFIDENTIAL**

Form ACO-1  
 September 1999  
 Form Must Be Typed

*ORIGINAL*

Operator: License # 6569  
 Name: Carmen Schmitt Inc.  
 Address: P.O. Box 47  
 City/State/Zip: Great Bend, KS 67530  
 Purchaser: \_\_\_\_\_  
 Operator Contact Person: Carmen Schmitt  
 Phone: (620) 793 5100  
 Contractor: Name: Shields Oil Producers, Inc.  
 License: 5184

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**RECEIVED**

**JAN 18 2005**

**KCC WICHITA**

Wellsite Geologist: Richard P. O'Donnell

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. \_\_\_\_\_

10-26-04	<u>11-5-04</u>	<u>11-5-04</u>
Spud Date or Recompletion Date	<u>11-6-04</u> Date Reached TD	<u>11-6-04</u> Completion Date or Recompletion Date

API No. 15 - 135-24311-0000

County: Ness

W/2 SE NE Sec. 20 Twp. 19s S. R. 23w  East  West

1980' FNL \_\_\_\_\_ feet from S / N (circle one) Line of Section

990' FEL \_\_\_\_\_ feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Miner Well #: 1

Field Name: W.C.

Producing Formation: N.A.

Elevation: Ground: 2253 Kelly Bushing: 2258

Total Depth: 4437 Plug Back Total Depth: N.A.

Amount of Surface Pipe Set and Cemented at 217 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 ALT II P/A with  
 (Data must be collected from the Reserve Pit) 3-1-07

Chloride content 33,000 ppm Fluid volume 680 bbls

Dewatering method used Evaporation

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: Carmen Schmitt

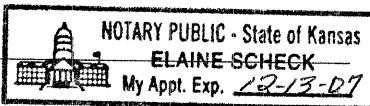
Title: Secretary Date: 1-14-05

Subscribed and sworn to before me this 14 day of January

20 05

Notary Public: Elaine Schreck

Date Commission Expires: 12-13-07



**KCC Office Use ONLY**

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

Operator Name: Carmen Schmitt Inc. Lease Name: Miner Well #: 1  
 Sec. 20 Twp. 19s S. R. 23w  East  West County: Ness

**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:

Dual Compensated Porosity, Dual Induction,  
 Microresistivity, Sonic

Log Formation (Top), Depth and Datum  Sample

Name	Top	Datum
Anhydrite	1530	+728
Heebner	3688	-1430
Lansing	3735	-1477
Base K.C.	4040	-1782
Fort Scott	4239	-1981
Cherokee Shale	4262	-2004
Mississippian	4322	-2064

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	12.25"	8.625"	20	217	Common	150	3% cc, 2% gel

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

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 KCC WICHITA

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
		<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

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

METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled

Production Interval  Other (Specify) \_\_\_\_\_



# ALLIED CEMENTING CO., INC. 20162

Federal Tax I.D.# 48-0727860

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

JAN 17 2005

SERVICE POINT: Ness City

CONFIDENTIAL

( 10-26-04 )

DATE <u>10-27-04</u>	SEC. <u>20</u>	TWP. <u>19s</u>	RANGE <u>23W</u>	CALLED OUT <u>6:00</u>	ON LOCATION <u>7:30</u>	JOB START <u>1:55 PM</u>	JOB FINISH <u>2:15 PM</u>
LEASE <u>MINDER</u>	WELL # <u>1</u>	LOCATION <u>Ness City SS 12 3/4 N 1/4 W</u>			COUNTY <u>NESS</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR <u>SHIELDS DRILLING CO.</u>	OWNER <u>CARMEN SCHMITT</u>
TYPE OF JOB <u>SURFACE CSG.</u>	
HOLE SIZE <u>12 1/4"</u>	T.D. <u>220'</u>
CASING SIZE <u>8 5/8"</u>	DEPTH <u>217'</u>
TUBING SIZE _____	DEPTH _____
DRILL PIPE _____	DEPTH _____
TOOL _____	DEPTH _____
PRES. MAX _____	MINIMUM _____
MEAS. LINE _____	SHOE JOINT _____
CEMENT LEFT IN CSG. <u>15'</u>	
PERFS. _____	
DISPLACEMENT <u>13 BLS</u>	
EQUIPMENT	
PUMP TRUCK # <u>224</u>	CEMENTER <u>BUD</u>
	HELPER <u>JIM</u>
BULK TRUCK # <u>260</u>	DRIVER <u>BURR</u>
BULK TRUCK # _____	DRIVER _____

CEMENT	AMOUNT ORDERED		
	<u>1500L Common 3% CL</u>		
	<u>2% BEL</u>		
COMMON	<u>1500L</u>	@	<u>7.85</u>
POZMIX		@	
GEL	<u>30L</u>	@	<u>11.00</u>
CHLORIDE	<u>50L</u>	@	<u>33.00</u>
ASC		@	
<b>RECEIVED</b>			
<b>JAN 18 2005</b>			
<b>KCC WICHITA</b>			
HANDLING	<u>1500L</u>	@	<u>1.38</u>
MILEAGE	<u>150 Miles</u>	@	<u>7.00</u>
			<u>213.30</u>
			<u>150.00</u>
			<b>TOTAL 1738.80</b>

REMARKS:  
Hook up to 8 5/8" DREAM COG  
With 1500L Common 3% CL 2% BEL  
Displace w/ 13 BLS Fresh H<sub>2</sub>O  
Cement Calculated  
11 TANKS

CHARGE TO: CARMEN SCHMITT  
 STREET P.O. Box 117  
 CITY GREAT BEND STATE KS ZIP 67530

SERVICE			
DEPTH OF JOB	<u>217'</u>		
PUMP TRUCK CHARGE			<u>570.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>7</u>	@	<u>4.00</u>
MANIFOLD		@	
		@	
		@	
			<b>TOTAL 598.00</b>

PLUG & FLOAT EQUIPMENT			
1-Top 8 5/8" WOOD		@	<u>55.00</u>
		@	
		@	
		@	
		@	
			<b>TOTAL 55.00</b>

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.

TAX \_\_\_\_\_  
 TOTAL CHARGE \_\_\_\_\_  
 DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE Burton Beery

Burton Beery  
PRINTED NAME