

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

**CONFIDENTIAL**

**ORIGINAL**

Operator: License # 3167  
Name: IGWT, INC.  
Address: 150 N. MAIN, SUITE 500  
City/State/Zip: WICHITA, KS 67202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: KENTON L. HUPP  
Phone: (316) 265-5800  
Contractor: Name: VAL ENERGY

**KCC**

**OCT 06 2003**

**CONFIDENTIAL**

License: \_\_\_\_\_  
Wellsite Geologist: CHRIS KNIGHTON  
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>8-20-03</u>	<u>9-1-03</u>	<u>9-3-03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 187 21004 0000  
County: STANTON  
NW NW Sec. 11 Twp. 27 S. R. 41  East  West  
680 feet from S  (circle one) Line of Section  
960 feet from E  (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE  NW SW

Lease Name: GOLDEN SPREAD Well #: 1-11  
Field Name: WC

Producing Formation: \_\_\_\_\_  
Elevation: Ground: 3296 Kelly Bushing: 3306  
Total Depth: 5600 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 1632 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 I Per with  
(Data must be collected from the Reserve Pit) 2-14-07  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used EVAPORATION

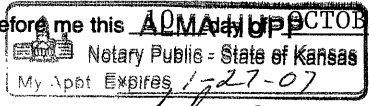
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_ **RECEIVED**  
KANSAS CORPORATION COMMISSION  
Lease Name: \_\_\_\_\_ License **OCT 22 2003**  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R.  East  West  
County: \_\_\_\_\_ Docket No.: WICHITA, KS

**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: Kenton Hupp  
Title: PRESIDENT Date: 10-07-03

Subscribed and sworn to before me this 10 2003  
Notary Public: Alma Hupp  
Date Commission Expires: 1-27-07



**KCC Office Use ONLY**

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

Operator Name: IGWT, INC. Lease Name: GOLDEN SPREAD Well #: 1-11  
 Sec. 11 Twp. 27 S. R. 41  East  West County: STANTON

**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:

CDL/CNL/PE

DIL/SONIC/MEL

Log Formation (Top), Depth and Datum  Sample

Name	Top	Datum
HEEBNER	3660	~ 354
MORROW SHALE	4944	~ 1638
MISSISSIPPI	5421	~ 2115
TD	5600	

**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	# Sacjs Used	Type and Percent Additives
SURFACE	12 1/4	8 5/8	23	1632	COMMON/LITE	700	

**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

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, Sumit ACO-18.)

**METHOD OF COMPLETION**  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

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

# ALLIED CEMENTING CO., INC. 11159

Federal Tax I.D.# 48-0727860

**ORIGINAL**

**CONFIDENTIAL**

MAIL TO: P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Oaklax

DATE <u>9/13/03</u>	SEC. <u>11</u>	TWP. <u>27s</u>	RANGE <u>41W</u>	CALLED OUT	ON LOCATION <u>9:45 AM</u>	JOB START <u>12:00 PM</u>	JOB FINISH <u>2:45 PM</u>
LEASE <u>Golden Spread</u>		WELL # <u>1-11</u>		LOCATION <u>Jatterson 10N 1W 4S E1S</u>		COUNTY <u>Stanton</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR <input checked="" type="radio"/> NEW (Circle one)				<b>KCC</b>			

CONTRACTOR Val Energy #1

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. 5600

CASING SIZE 8 3/4 DEPTH 1632

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 16.60 DEPTH 1650

TOOL DEPTH

PRES. MAX 250 MINIMUM 50

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER Same OCT 06 2003

CEMENT AMOUNT ORDERED CONFIDENTIAL

130 SKS 60/46 + 670 gal 4" Flo-Seal

COMMON	<u>78 SKS</u>	@	<u>8.35</u>	<u>651.30</u>
POZMIX	<u>52 SKS</u>	@	<u>3.80</u>	<u>197.60</u>
GEL	<u>7 SKS</u>	@	<u>10.00</u>	<u>70.00</u>
CHLORIDE		@		
<u>Flo-Seal 33#</u>		@	<u>1.40</u>	<u>46.20</u>
		@		
		@		
		@		
HANDLING	<u>130 SKS</u>	@	<u>1.15</u>	<u>149.50</u>
MILEAGE	<u>54 per SK/mile</u>			<u>227.50</u>

**EQUIPMENT**

PUMP TRUCK CEMENTER Max

# 373-281 HELPER Andrew

BULK TRUCK

# 315 DRIVER Jarrod

BULK TRUCK

# DRIVER

RECEIVED  
KANSAS CORPORATION COMMISSION  
**OCT 22 2003**

TOTAL 1,342.10

**REMARKS:**

CONSERVATION DIVISION  
WICHITA, KS

**SERVICE**

Plug well thru Drill Pipe

Spot Plugs: 50 SKS @ 1650 FT

50 SKS @ 750 FT

15 SKS @ 40 FT

15 SKS in Rat Hole

DEPTH OF JOB	<u>1650</u>		
PUMP TRUCK CHARGE			<u>630.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>35 mi</u>	@	<u>350</u>
PLUG		@	
		@	
		@	

TOTAL 752.50

CHARGE TO: I W G T Inc.

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**FLOAT EQUIPMENT**

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

TOTAL \_\_\_\_\_

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 [Signature]

PRINTED NAME \_\_\_\_\_