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SEP 29 2005

KCC WICHITA

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 # 30604
Name: Raydon Exploration, Inc.
Address: 9400 N. Broadway, Ste. 400
City/State/Zip: Oklahoma City, OK 73114
Purchaser: _____
Operator Contact Person: David E. Rice
Phone: (620) 624-0156
Contractor: Name: Big A Drilling
License: 31572
Wellsite Geologist: Ed Grieves

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SEP 28 2005

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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. _____

06-06-05	06-14-05	07-09-05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 175-219890000
County: Seward
NE NE SW Sec. 23 Twp. 32 S. R. 32 East West
2310' feet from S N (circle one) Line of Section
2395' feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Scantlin Well #: 1-23
Field Name: Wildcat

Producing Formation: Lansing & Lime
Elevation: Ground: 2813 Kelly Bushing: 2824'
Total Depth: 4550' Plug Back Total Depth: 4507'
Amount of Surface Pipe Set and Cemented at 1679 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) *KL9 I with
LF-24-07*
Chloride content 7000 ppm Fluid volume _____ bbls
Dewatering method used _____
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: David E Rice
Title: Agent for Raydon Date: 9-28-05
Subscribed and sworn to before me this 28th day of September,
~~2005~~
Notary Public: Becki Andrews
Date Commission Expires: _____

NOTARY PUBLIC - STATE OF KANSAS
BECKI ANDREWS
My Commission Expires 4-22-2009

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

JAN 17 2017

Side Two

Operator Name: Raydon Exploration, Inc. Lease Name: Scantlin Well #: 1-23
 Sec. 23 Twp. 32 S R. 32 East West County: Seward

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)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Base Heebner 4230
 Toronto 4239
 Lansing 4331

List All E. Logs Run:

High Resolution Induction Log
 Spectral Density Dual Spaced Neutron Log
 Microlog

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	12-1/4"	8-5/8"	24#	1679'	Midcon C	405	3%cc, 1/4#/sk flc
					Premium Plu	150	2% cc, 1/4#/sk fl
Production	7-7/8"	4-1/2"	10.5#	4550'	50/50 Poz H	100	2% gel, 10#/sk g

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
	4334'-4340'	1200 gal 15% FE acid	4340

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-3/8"	4423'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method			
		<input checked="" 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
	10	N/A	2	N/A	

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

HALLIBURTON JOB SUMMARY

REGION NORTH AMERICA LAND	MWA / COUNTRY Central / USA	SALES ORDER NUMBER 3770354	TICKET DATE 06/15/05
NBU ID / EMPL # MCL10104 317429	H.E.S. EMPLOYEE NAME CHAD BUTTRY	BDA / STATE MC / KS	COUNTY SEWARD
LOCATION LIBERAL	COMPANY RAYDON EXPLORATION	PSL DEPARTMENT ZI / CEMENT	CUSTOMER REP / PHONE DAVID RICE
TICKET AMOUNT \$12,160.98	WELL TYPE 01 OIL	API/UVI #	
WELL LOCATION LIBERAL, KS	DEPARTMENT CEMENT	SAP BOMB NUMBER 7523	Description Cement Production Casing
LEASE NAME SCANTLIN	Well No. 2428524	SEC / TWP / RNG 23 - 32S - 32W	HES FACILITY (CLOSEST TO WELL SITE) LIBERAL

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Buttry, C 317429	15.0			
Evans, J 212723	15.0			
Albright, J 325347	15.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES
10415642	60		
10219237	60		
10243558-10011590	30		

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth **4550**

Date	Called Out	On Location	Job Started	Job Completed
	6/15/2005	6/15/2005	6/15/2005	6/15/2005
Time	0230	0400	1528	1609

Tools and Accessories

Type and Size	Qty	Make
Float Collar INSERT	1	H
Float Shoe BASKET	1	
Centralizers FLUIDMASTERS	8	A
Top Plug HWE	1	
HEAD PC	1	L
Limit clamp	1	
Weld-A		C
Guide Shoe REG	1	
BTM PLUG		O

Well Data

Casing	New/Used	Weight	Size	Grade	From	To	Max. Allow
Liner		10.5#	4 1/2		0	4,576	
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8		0-	4,550	Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

Mud Type _____	Density _____	Lb/Gal _____
Disp. Fluid _____	Density _____	Lb/Gal _____
Prop. Type _____	Size _____	Lb _____
Prop. Type _____	Size _____	Lb _____
Acid Type _____	Gal. _____	% _____
Acid Type _____	Gal. _____	% _____
Surfactant _____	Gal. _____	In _____
NE Agent _____	Gal. _____	In _____
Fluid Loss _____	Gal/Lb _____	In _____
Gelling Agent _____	Gal/Lb _____	In _____
Fric. Red. _____	Gal/Lb _____	In _____
Breaker _____	Gal/Lb _____	In _____
Blocking Agent _____	Gal/Lb _____	
Perfpac Balls _____	Qty. _____	
Other _____		
Other _____		
Other _____		
Other _____		
Other _____		

Hours On Location

Date	Hours
6/15	14.5
Total	14.5

Operating Hours

Date	Hours
6/15	16.6
Total	16.6

Description of Job
 Cement Production Casing
 SEE JOB PROCEDURE
RECEIVED
 SEP 29 2005
 KGC WICHITA

Ordered _____ Hydraulic Horsepower _____
 Avail. _____ Used _____
 Treating _____ Average Rates in BPM _____
 Disp. _____ Overall _____
 Feet **42** Cement Left in Pipe _____
 Reason _____ **SHOE JOINT**

Cement Data

Stage	Sacks	Cement	Additives	W/Rq.	Yield	Lbs/Gal
1	100	50/50 POZ H	2% TOTAL GEL - 10# GILSONITE - 6/10% HALAD-322	15.90	2.77	11.00
2	100	PREMIUM H	10% CALSEAL - 10% SALT - 5# GILSONITE - .6% HALAD-322 -	6.23	1.48	15.00
3	25	50/50 POZ H	2% TOTAL GEL - 10# GILSONITE - 6/10% HALAD-322	7.08	1.59	13.00
4						

Summary

Circulating _____	Displacement _____	Preflush: BBI _____	Type: _____
Breakdown _____	MAXIMUM _____	Load & Bkdn: Gal - BBI _____	Pad: Bbl - Gal _____
Lost Returns-YES _____	Lost Returns-NO _____	Excess /Return BBI _____	Calc. Disp Bbl _____
Cmt Rtn#Bbl _____	Actual TOC _____	Calc. TOC: _____	Actual Disp. _____
Average _____	Frac. Gradient _____	Treatment: Gal - BBI _____	Disp: Bbl _____
Shut In: Instant _____	5 Min. _____	Cement Slurry: BBI _____	7.2
	15 Min. _____	Total Volume BBI _____	82.0

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____
 SIGNATURE _____