

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

ORIGINAL

Operator: License # 33269
Name: CENTRAL OPERATING, INC.
Address: 1600 Broadway Suite #1050
City/State/Zip: Denver, CO 80202
Purchaser: _____
Operator Contact Person: P.A. BREW
Phone: (303) 894-9576
Contractor: Name: Murfin Drilling Co. Inc.
License: 30606
Wellsite Geologist: Jerry Green

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. _____
5-6-04 5-11-04
spud Date or Date Reached TD Completion Date or
recompletion Date

API No. 15 - 167-23251-0000
County: Russell
60°N30°W
S/2S/2NE Sec. 16 Twp. 15 S. R. 14 East West
2250' feet from S (N) (circle one) Line of Section
1350' feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Kilian/Sricker Well #: 2
Field Name: Strick
Producing Formation: _____
Elevation: Ground: 1811' Kelly Bushing: 1816'
Total Depth: 3351' Plug Back Total Depth: 1816'
Amount of Surface Pipe Set and Cemented at 262' 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#2} P.A. KCR 6/04/07
(Data must be collected from the Reserve Pit)
Chloride content _____ 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.

I, the undersigned, being duly sworn, depose and say that the foregoing information is true and correct to the best of my knowledge.

Signature: P.A. Brew
Title: President Date: May 14, 2004
Subscribed and sworn to before me this 14th day of May, 2004.
Notary Public: [Signature]
Notary Commission Expires: May 28, 2007

KCC Office Use ONLY

NO Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

X

Operator Name: CENTRAL OPERATING, INC. Lease Name: Kilian/Srticker Well #: 2
 Sec. 16 Twp. 15 S. R. 14 East West County: Russell

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:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Topeka	2736	-920
Heebner	2964	-1148
Toronto	2983	-1167
Lansing	3026	-1210
Arbuckle	3351	-1535

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	# Sacjs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8	24#	262'	60-40 Poz	170	2%Gel & 3&CC

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

Production Interval Other (Specify)

ALLIED CEMENTING CO., INC. 16870

ORIGINAL

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

SERVICE POINT: R

DATE <u>5/16/04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>8:00p.m.</u>	JOB START	JOB FINISH <u>10:15p.m.</u>
LEASE <u>Stricker</u> WELL# <u>2</u>			LOCATION <u>Russell 7s 12w</u>		COUNTY <u>RS</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>Gas & E Inj</u>				

CONTRACTOR Murfin #16

TYPE OF JOB Surface

HOLE SIZE 12 1/4" T.D. 2103'

CASING SIZE 8 5/8" DEPTH 2103'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 10'

PERFS. _____

DISPLACEMENT 110 1/4

OWNER _____

CEMENT AMOUNT ORDERED 170 Com 302

COMMON	<u>170</u>	@	<u>765</u>	<u>130050</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>1100</u>	<u>3300</u>
CHLORIDE	<u>5</u>	@	<u>3000</u>	<u>15000</u>
ASC		@		
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>178</u>	@	<u>125</u>	<u>22250</u>
MILEAGE	<u>54/SK/MILE</u>	@		<u>12500</u>
TOTAL				<u>183100</u>

EQUIPMENT

PUMP TRUCK CEMENTER Paul

3660 HELPER Steve

BULK TRUCK

222 DRIVER Rufus

BULK TRUCK

_____ DRIVER _____

REMARKS:

Cement Circulated!

CHARGE TO: Central Operating

STREET _____

CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 52000

EXTRA FOOTAGE _____ @ _____

MILEAGE 10 @ 400 4000

Plug 8 5/8 @ 4500

TOTAL 60500

PLUG & FLOAT EQUIPMENT

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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] Bill Wynn PRINTED NAME

THANKS