

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 # 6137
Name: Donald & Jack Ensminger
Address: 1446-3000 St.
City/State/Zip: Moran, Kansas 66755
Purchaser: Crude Marketing
Operator Contact Person: Don Ensminger
Phone: (316) 496-2300 or 496-7181 Cell
Contractor: Name: Company tools
License: 6137

API No. 15 - 15-001-29035-00-00
County: Allen
NW NE SW Sec. 14 Twp. 25 S. R. 19 East West
1985 feet from S / N (circle one) Line of Section
3305 feet from E / W (circle one) Line of Section

Wellsite Geologist: _____
Designate Type of Completion: **MAR 08 2004**
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Scott Well #: B-19
Field Name: Moran
Producing Formation: Bartlesville

If Workover/Re-entry: Old Well Info as follows:

Elevation: Ground: Ground Kelly Bushing: _____
Total Depth: 900 Plug Back Total Depth: 871
Amount of Surface Pipe Set and Cemented at 20' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from Surface
feet depth to 871 w/ 100 sx cmf.

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. _____
11-30-03 12-2-03 12-19-03
Spud Date or Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan ALT #2 KR 6/05/07
(Data must be collected from the Reserve Pit)
Chloride content 125 ppm Fluid volume _____ bbls
Dewatering method used Air dry backfill & level
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: Donald Ensminger
Title: owner Date: 3-4-04
Subscribed and sworn to before me this 4 day of march

Notary Public: Michele L. Ogle
Date Commission Expires: 6-9-04

MICHELE L. OGLE
Notary Public - State of Kansas
My Appt. Expires 6-9-04

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

X

Operator Name: Donald & Jack Ensminger Lease Name: Scott Well #: B-19
 Sec. 14 Twp. 25 S. R. 19 East West County: Allen

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Soil</td> <td>0</td> <td>4</td> </tr> <tr> <td>Ls with Sh streaks</td> <td>4</td> <td>242</td> </tr> <tr> <td>Sh with Ls streaks</td> <td>242</td> <td>764</td> </tr> <tr> <td>Oil Sd</td> <td>764</td> <td>772</td> </tr> <tr> <td>Sh</td> <td>772</td> <td>827</td> </tr> <tr> <td>Oil Sd</td> <td>827</td> <td>864</td> </tr> <tr> <td>Sh</td> <td>864</td> <td>900</td> </tr> </tbody> </table>	Name	Top	Datum	Soil	0	4	Ls with Sh streaks	4	242	Sh with Ls streaks	242	764	Oil Sd	764	772	Sh	772	827	Oil Sd	827	864	Sh	864	900
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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	# Sacs Used	Type and Percent Additives
Surface	10 1/2"	7"	21	20'	Common	5 Sx	None
Production	5 5/8	2 7/8	6.5	871	Common	100 SX	None

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
2	34 shots 828-844	100 gal. acid fracked	30
		Sx sand 120 BB1 gelled	
		water	828-844

TUBING RECORD		Size	Set At	Packer At	Liner Run
		1"	855		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.			Producing Method		
1-20-04			<input type="checkbox"/> Flowing <input checked="" 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	trace	8		24

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify)

DRILLING TIME REPORT

ORIGINAL

COMPANY: Ensminger Oil
 FARM: Scott
 NO. B-19
 TYPE OF INDICATOR API 15-001-29035
 WEIGHT ON DRILL PIPE _____
 R.P.M. ROTARY TABLE _____

COUNTY: Allen
 SEC. 14 TWP. 25 RANGE 15
 TYPE OF RIG 1985 MF South
 MUD WEIGHT 3305 F East
 MUD VISCOSITY: NE, SW
 CONTRACTOR Ensminger Oil

RECEIVED
 MAR 08 2004
 KCC WICHITA

DEPTH		ACTUAL DRILLING TIME		MINUTES PER	REMARKS	BIT NO.
FROM	TO	BEGAN	ENDED			
	Salt Crk	4			Set 21.8' of 7" Cemented	
	Lime	26				
	Shale	121			5 5/8 Hole	
121	Lime	242				
177	Shale	419			T.O. Hole 900'	
5	Lime	424				
16	Shale	440			T.O. 278 871'	
10	Lime	450				
19	Shale	519				
39	Lime	558				
36	Shale	594				
19	Lime	613				
1	Shale	641				
3	Coal	617				
1	Shale	618				
5	Lime	623				
3	Shale	626				
7	Coal	627				
	Shale	700	(642'-80')			
1	Coal	701				
20	Shale	721				
2	Coal	723				
	Shale	751				
1	Coal	752		20	Black Sand 864	
	Shale	764		2	Coal 866	
8	Oil Sand	772			Shale	
	Shale	797				
2	Coal	799				
	Shale	827				
5	Broken Sand	832				
12	Oil Sand	844				

DESIGNED A.M. AND P.M. TIME

RECORD TIME TOUR IS CHANGED UNDER REMARKS.

ACTUAL DRILLING TIME IS TIME SPENT IN DRILLING THE DEPTH. SHUT DOWN TIME IS SPENT SHUT DOWN FOR REPAIRS, ROUND TRIPS, WATER, ETC. SHOW WHEN BIT IS CHANGED AND KIND OF NEW BIT. MENTION ROUND TRIPS IN REMARKS COLUMN. FILL OUT THIS FORM FROM TOP TO BOTTOM OF HOLE.

FAIRLESS CONCRETE
9000 INDUSTRIAL RD.
P.O. BOX 664
WICHITA, KS 66749

ORIGINAL

Invoice
Invoice Number:
11255

Invoice Date:
Dec 2, 2003

Page:
1

Voice: 316-20-365-5588
Fax:

RECEIVED

Duplicate

MAR 08 2004

KCC WICHITA

Ship to:

Sold to:
CHALLENGER OIL
1116 000 ST.
WICHITA, KS 66755

Customer ID
BN001

Customer PO
SCOTT LS#B19

Payment Terms
Net 10th of Next Month

Sales Rep ID

Shipping Method

Ship Date

Due Date

TRUCK

1/10/04

Quantity	Item	Description	Unit Price	Extension
100.00	CEM/WAT	PER BAG CEMENT/WATER MIX	6.00	600.00
1.00	TR001	TRUCKING	35.00	35.00

Subtotal 635.00

Sales Tax 40.01

Total Invoice Amount 675.01

Payment/Credit Applied

TOTAL 675.01

Check/Credit Memo No: