

ORIGINAL

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

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 329002
Name: Hopewell Operating, Inc.
Address: 4600 Greenville Ave., Suite 200
City/State/Zip: Dallas, TX 75206
Purchaser: Plains Marketing
Operator Contact Person: Carol Shiels
Phone: (214) 691-6216
Contractor: Name: Well Refined Drilling
License: 33072
Wellsite Geologist: Dick Cornell

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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. _____

11/26/2003 11/29/2003 N/A

Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion DateAPI No. 15 - 15-001-29040 0000County: AllenNE SE SW Sec. 11 Twp. 24 S. R. 20 ☒ East ☐ West

990 feet from S / N (circle one) Line of Section

2310 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Dozier Well #: 1

Field Name: _____

Producing Formation: N/AElevation: Ground: 1074 Kelly Bushing: _____Total Depth: 1063 Plug Back Total Depth: _____Amount of Surface Pipe Set and Cemented at 20' 7" FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 0feet depth to 20' 7" w/ 4 sx cmt.

Drilling Fluid Management Plan

(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: _____

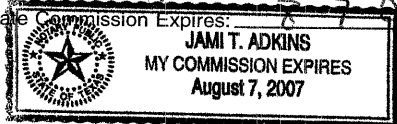
Lease Name: _____ License No.: _____

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.

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: Marie BeatzTitle: Geological Assistant Date: 4/02/04Subscribed and sworn to before me this 2nd day of April2004Notary Public: Jamie J AdkinsDate Commission Expires: 8-7-07

KCC Office Use ONLY

☐ Letter of Confidentiality AttachedIf Denied, Yes ☐ Date: _____☐ Wireline Log Received☐ Geologist Report Received☐ UIC Distribution

Operator Name: Hopewell Operating, Inc. Lease Name: Dozier Well #: 1
 Sec. 11 Twp. 24 S. R. 20 ☒ 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 ☐ 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:

GR, Neutron, Density, Temperature, Induction

☒ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
B/ Kansas City	250	GL
T/ Ft. Scott	594	GL
T/ Mississippian	985	GL

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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	# Sacks Used	Type and Percent Additives
surface	12 1/4	8 5/8		20' 7"	portland	4	
production	6 3/4	5 1/2	17#/ft	1059	50/50 POZ	210	see ticket

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
				☐ Yes ☐ No
Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
	☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
 (If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☒ Other (Specify) not completed TA'd

CONSOLIDATED

OIL WELL
SERVICES
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

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KCC WICHITA

TICKET NUMBER 20249

LOCATION CHANUTE

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
12-1-03	3557	DOZIER #1		11	24S	20E	AL	
CHARGE TO <u>HOPEWELL OPERATING CO.</u>				OWNER				
MAILING ADDRESS <u>5307 MOCKING BIRD LN. STE. 906</u>				OPERATOR				
CITY & STATE <u>DALLAS, TX. 75206</u>				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1-WELL	PUMP CHARGE CEMENT PUMP		525.00
1118	7 SKS	PREMIUM GEL/BENTONITE (4 IN LOAD; 3 AHEAD)		82.60
1110	23 SKS	GILSONITE		446.20
1111	600#s 12 SKS	GRANULATED SALT		130.00
1107	2 SKS	CELLO-FLAKE/FLO-SEAL		15.50
4405	1	5 1/2 RUBBER PLUG		37.50
1123	5880 GALS	CITY WATER (140 BBLs)		66.15
5407	40 MI	BLENDING & HANDLING TON-MILES DELIVERY (MINIMUM)		190.00
5501	4 HR	STAND BY TIME MILEAGE		320.00
5502	1 HR	WATER TRANSPORTS VACUUM TRUCKS		75.00
1124	210 SKS	FRAC SAND CEMENT 50/50 P02		1354.50
		SALES TAX		139.30
		ESTIMATED TOTAL		3461.83

Ravin 2790

ESTIMATED TOTAL

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN

TODD A. TINDLE

CUSTOMER or AGENT (PLEASE PRINT)

DATE

188089

SOLIDATED OIL WELL SERVICES, INC.
 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

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TICKET NUMBER **28256**
 LOCATION CHANUTE
 FOREMAN TODD A TINDLE

TREATMENT REPORT

DATE <u>12-1-03</u>	CUSTOMER # <u>3557</u>	WELL NAME #1 <u>DOZIER</u>	FORMATION
SECTION <u>11</u>	TOWNSHIP <u>24S</u>	RANGE <u>20E</u>	COUNTY <u>AL</u>
CUSTOMER <u>HOPWELL OPERATING CO.</u>			
MAILING ADDRESS <u>5307 E. MOCKINGBIRD LN. STE 9016</u>			
CITY <u>DALLAS</u>			
STATE <u>TEXAS</u>		ZIP CODE <u>75206</u>	
TIME ARRIVED ON LOCATION			

TRUCK #	DRIVER	TRUCK #	DRIVER
<u>255</u>	<u>HERB</u>		
<u>103</u>	<u>MITCH</u>		
<u>140</u>	<u>TIM</u>		

WELL DATA	
HOLE SIZE <u>7 7/8</u>	PACKER DEPTH
TOTAL DEPTH <u>1063'</u>	PERFORATIONS
	SHOTS/FT
CASING SIZE <u>5 1/2</u>	OPEN HOLE
CASING DEPTH <u>1058'</u>	
CASING WEIGHT	TUBING SIZE
CASING CONDITION	TUBING DEPTH
	TUBING WEIGHT
	TUBING CONDITION
TREATMENT VIA	

TYPE OF TREATMENT	
☐ SURFACE PIPE	☐ ACID BREAKDOWN
☒ PRODUCTION CASING	☐ ACID STIMULATION
☐ SQUEEZE CEMENT	☐ ACID SPOTTING
☐ PLUG & ABANDON	☐ FRAC
☐ PLUG BACK	☐ FRAC + NITROGEN
☐ MISP. PUMP	☐
☐ OTHER	☐

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB HOOK UP TO 5 1/2 CASING; PUMP FRESH H₂O; RUN 2SKS GEL FOLLOWED BY FRESH H₂O UNTIL CIRCULATION; RUN 16 GAL DYE; FOLLOWED BY CEMENT UNTIL DYE RETURN; SHUT DOWN FLUSH PUMP; PUMP PLUG; SET FLOAT SHOE

AUTHORIZATION TO PROCEED

TITLE

DATE

TIME AM / PM	STAGE	BBL'S PUMPED	INJ RATE	PROPPANT PPG	SAND / STAGE	PSI	
							BREAKDOWN PRESSURE
							DISPLACEMENT
							MIX PRESSURE
							MIN PRESSURE
							ISIP
							15 MIN.
							MAX RATE
							MIN RATE