

**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

**ORIGINAL**

Operator: License # 4567  
 Name: D.E. Exploration, Inc.  
 Address: P.O. Box 128  
 City/State/Zip: Wellsville, KS 66092  
 Purchaser: Plain's Marketing, L.P.  
 Operator Contact Person: Douglas G. Evans  
 Phone: (785) 883-4057  
 Contractor: Name: Finney Drilling Company  
 License: 5989  
 Wellsite Geologist: None  
 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>6/27/03</u>	<u>7/2/03</u>	<u>7/2/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 031-21969-00-00  
 County: Coffey  
NW SW SE NE Sec. 33 Twp. 22 S. R. 16  East  West  
3210 feet from (S) N (circle one) Line of Section  
1240 feet from (E) W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE SE NW SW  
 Lease Name: Nelson Well #: RI-2  
 Field Name: Neosho Falls/LeRoy  
 Producing Formation: Squirrel  
 Elevation: Ground: NA Kelly Bushing: NA  
 Total Depth: 1062.0' Plug Back Total Depth: NA  
 Amount of Surface Pipe Set and Cemented at 43.90' Feet  
 Multiple Stage Cementing Collar Used?  Yes  No  
 If yes, show depth set \_\_\_\_\_ Feet  
 If Alternate II completion, cement circulated from 1056.0'  
 feet depth to Top \_\_\_\_\_ w/ 138 \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan** ALT#2 KGR 6/12/07  
 (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.

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: Douglas G. Evans  
 Title: President Date: 1-28-04  
 Subscribed and sworn to before me this 28<sup>th</sup> day of January,  
2004.  
 Notary Public: Stacy J. Thyer  
 Date Commission Expires: March 31, 2007

**KCC Office Use ONLY**

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

NOTARY PUBLIC  
STATE OF KANSAS  
STACY J. THYER  
My Appt. Exp. 3-31-07

X

ORIGINAL

Operator Name: D.E. Exploration, Inc. Lease Name: Nelson Well #: RI-2  
 Sec. 33 Twp. 22 S. R. 16  East  West County: Coffey

**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 <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  <b>Gamma Ray/Neutron/CCL</b>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name Top Datum          <div style="text-align: right; font-weight: bold; font-size: 1.2em;">                     RECEIVED                      FEB 02 2004                      KCC WICHITA                 </div>
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	11 5/8"	7'	19	43.90'	I	52	Service Co.
Production	5 5/8"	2 7/8"	6.5	1056.00'	I	138	Service Co.

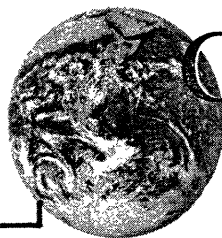
ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone				

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
19	1025.0'-1034.0'	2" DML RTG	1025.0'
			1034.0'

TUBING RECORD		Size <b>2 7/8"</b>	Set At <b>1056.0'</b>	Packer At <b>No</b>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <b>NA</b>		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
			<b>NA</b>		

Disposition of Gas      **METHOD OF COMPLETION**      Production Interval

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



# CONSOLIDATED OIL WELL SERVICES, INC.

AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 620/431-9210 • 1-800/467-8676

ORIGINAL

RECEIVED  
FEB 02 2004  
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Page 1

INVOICE DATE	INVOICE NO.
06/30/03	00184955

D.E. EXPLORATION  
DOUG EVANS  
P.O. BOX 128  
WELLSVILLE KS 66092

CONSOLIDATED OIL WELL SERVICES, INC.  
DEPT. 3667  
135 SOUTH LASALLE  
CHICAGO, IL 60674-3667

TERMS: Net 30 Days  
A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	PO NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
2355	0602	20	NELSON RI-2	06/27/2003	20510		
ITEM NUMBER	DESCRIPTION			UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5401	CEMENT PUMPER			1.0000	472.5000	EA	472.50
5402	CASING FOOTAGE			44.0000	.0000	EA	.00
1118	PREMIUM GEL			1.0000	11.8000	SK	11.80
1110	GILSONITE (50#)			3.0000	19.4000	SK	58.20
1111	GRANULATED SALT (80#)			88.0000	.1000	LB	8.80
5502	80 BBL VACUUM TRUCK			1.5000	70.0000	HR	105.00
1124	50/50 POZ CEMENT MIX			31.0000	6.4500	SK	199.95

**PAID**  
CK NO | DATE  
2251 | 7-7-03  
\$11,094.78

GROSS INVOICE 856.25	TAX 18.96
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ORIGINAL INVOICE

PLEASE PAY 875.21
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