

**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

RECEIVED
01-17-2003
MAR 17 2003

Operator: License # 6892
Name: Trich Production, Inc.
Address: P. O. Box 1408
City/State/Zip: Longview, Texas 75606
Purchaser: NCRA
Operator Contact Person: Ken Fletcher
Phone: (972) 422-4335
Contractor: Name: Murfin Drilling Co., Inc.
License: 30606
Wellsite Geologist: Terry McLeod

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>10-05-02</u>	<u>10-11-02</u>	<u>11-20-02</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 163-23357-00-00

County: Rooks

140' N
150' E - SWNW Sec. 32 Twp. 10 S. R. 19 East West

1840 feet from S / (circle one) Line of Section

810 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Carol Well #: 1-32

Field Name: Jacob Extension

Producing Formation: Lansing/Kansas City

Elevation: Ground: 2128 Kelly Bushing: 2133

Total Depth: 3797 Plug Back Total Depth: 3466

Amount of Surface Pipe Set and Cemented at 234 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1585 Feet

If Alternate II completion, cement circulated from 1585

feet depth to Surface w/ 240 sx cmt.

Drilling Fluid Management Plan Alle 11 Ex 1-21-05
(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: Ken Fletcher

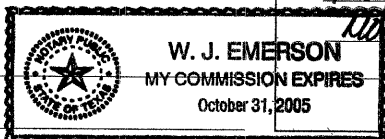
Title: AGENT Date: 1-13-03

Subscribed and sworn to before me this 13th day of January

2003

Notary Public: W. J. Emerson

Date Commission Expires: 10-31-05



KCC Office Use ONLY

NO Letter of Confidentiality Attached

If Denied, Yes Date: _____

NO Wireline Log Received

NO Geologist Report Received

UIC Distribution

15-163-23357-00-00

Operator Name: Trich Production, Inc. Lease Name: Carol Well #: 1-32
 Sec. 32 Twp. 10 S. R. 19 East West County: Rooks

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 <i>(Attach Additional Sheets)</i> Heb	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Log Formation (Top), Depth and Datum Name Top Datum Heebner Sh 3363 -1230 Lansing 3403 -1270 Base KC 3617 -1484 Arbuckle 3714 -1581 DST INFO: See attached
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Cores Taken	Yes <input checked="" type="checkbox"/> No	
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
List All E. Logs Run:		
Comp. Density-Neutron Dual Induction Sonic	Micro	

RECEIVED
 JAN 17 2003
 KCC WICHITA

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	24	234	Common	160	2% gel, 3% CI
Production	7 7/8	5 1/2	15 1/2	3799	ASC	200	2% gel, 10% salt

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surf-1585	60/40 poz	240	6% gel

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>		Depth
		Amount	Kind	
4	3567-69, 3550-60	250 gal,	15% MCA	
4	3488-92, 3476-80	250 gal,	15% MCA	
4	3452-54, 3433-37 CIBP 3466	250 gal,	15% MCA	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8	3453		Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr. 11-20-02	Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
Estimated Production Per 24 Hours Oil Bbls. 10 Gas Mcf 1 Water Bbls. 12 Gravity 29	Gas-Oil Ratio

Disposition of Gas: _____ METHOD OF COMPLETION: _____ Production Interval: **3433-54**

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

15-163-23357-00-00

Carol #1-32

M
1-21-03

DST #1: 3427-3505, 30-60-60-60. Rec 513' oil, 60' GOCM. IFP: 36-106#, FFP: 118-201#, SIP: 550-534#, HP: 1716-1685#.

DST #2: 3515-3625, 30-45-30-45. Rec 10' mud. IFP: 26-35, FFP: 35-39#, SIP: 882-800#, HP: 1771-1749#.

RECEIVED
JAN 17 2003
REGISTRATION DIV

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

#6

15-163-23357-00-00

 * I N V O I C E *

Invoice Number: 088318

Invoice Date: 10/16/02

Sold Trich Production, Inc.
 To: P. O. Box 1408
 Longview, TX
 75606

Cust I.D.....: Trich
 P.O. Number...: Carol 1-23
 P.O. Date.....: 10/16/02

Due Date.: 11/15/02
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	160.00	SKS	6.6500	1064.00	E
Gel	3.00	SKS	10.0000	30.00	E
Chloride	5.00	SKS	30.0000	150.00	E
Handling	168.00	SKS	1.1000	184.80	E
Mileage (23)	23.00	MILE	6.7200	154.56	E
168 sks @\$.04 per sk per mi					
Surface	1.00	JOB	520.0000	520.00	E
Mileage pmp trk	23.00	MILE	3.0000	69.00	E
Plug	1.00	EACH	45.0000	45.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 221.74
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2217.36
 Tax.....: 0.00
 Payments: 0.00
 Total....: 2217.36

- 221.74
\$ 1995.62

pd.
 12-6-02
 #1236

ALLIED CEMENTING CO., INC. 11761

Federal Tax I.D.# ~~XXXXXXXXXX~~

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

15-163-23357-00-00

SERVICE POINT: R

DATE <u>10/5/02</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>7:00 p.m.</u>	JOB START	JOB FINISH <u>8:30 p.m.</u>
LEASE <u>Carol</u>	WELL # <u>1-23</u>	LOCATION <u>Yocemento 2 1/2 W 3/4 N</u>			COUNTY <u>Reels</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)				<u>E I U</u>			

CONTRACTOR Martin #16
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4" T.D. 235'
 CASING SIZE 8 5/8" DEPTH 235'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 10'
 PERFS. _____
 DISPLACEMENT 14 1/4 351

OWNER _____
 CEMENT
 AMOUNT ORDERED 160 Com 390.66
290.661
 COMMON 160 Com @ 6.105 1016.40
 POZMIX _____ @ _____
 GEL 3 @ 10.00 30.00
 CHLORIDE 5 @ 30.00 150.00
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING 168 @ 1.10 184.80
 MILEAGE .0458/mi. 154.56
 TOTAL 1,583.36

EQUIPMENT

PUMP TRUCK CEMENTER Paul
 # 177 HELPER Darin
 BULK TRUCK
 # 282 DRIVER Shane
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

Cement Circulated!

Thank You ✓

SERVICE

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____ 520.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 23 @ 3.00 69.00
 PLUG 8 5/8 Wood @ 45.00 45.00
 _____ @ _____
 _____ @ _____
 TOTAL 1634.00

CHARGE TO: Trick Production
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 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 Bill Wynn
THANKS

Bill Wynn
 PRINTED NAME

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

posted 10-16-02

15-163-23357-00-00

 * I N V O I C E *

Invoice Number: 088319

Invoice Date: 10/16/02

Sold Trich Production, Inc.
 To: P. O. Box 1408
 Longview, TX
 75606

Cust I.D.....: Trich
 P.O. Number...: Carol 1-32
 P.O. Date.....: 10/16/02

Due Date.: 11/15/02
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Gel	4.00	SKS	10.0000	40.00	E
ASC	200.00	SKS	8.5000	1700.00	E
WFR-2	500.00	GAL	1.0000	500.00	E
Handling	204.00	SKS	1.1000	224.40	E
Mileage (24)	24.00	MILE	8.1600	195.84	E
204 sks @\$.04 per sk per mi					
Production String	1.00	JOB	1130.0000	1130.00	E
Mileage pmp trk	24.00	MILE	3.0000	72.00	E
TRP	1.00	EACH	60.0000	60.00	E
Guide Shoe	1.00	EACH	150.0000	150.00	E
Insert	1.00	EACH	235.0000	235.00	E
Centralizers	8.00	EACH	50.0000	400.00	E
Rec. Scratchers	18.00	EACH	35.0000	630.00	E
Port Collar	1.00	EACH	1750.0000	1750.00	E
Basket	1.00	EACH	128.0000	128.00	E

All Prices Are Net, Payable 30 Days Following Subtotal: 7215.24
 Date of Invoice. 1 1/2% Charged Thereafter. Tax.....: 0.00
 If Account CURRENT take Discount of \$ 721.53 Payments: 0.00
 ONLY if paid within 30 days from Invoice Date Total....: 7215.24

*pd. 12-12-02
 #1245*

*- 721.53
 \$ 6493.71*

ALLIED CEMENTING CO., INC. 11552

Federal Tax I.D.# ~~000000000~~

P.O. BOX 31
RUSSELL, KANSAS 67665

15-163-23357-00-00

SERVICE POINT: R

DATE <u>10-11-02</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>9:00AM</u>	JOB START <u>1:15 PM</u>	JOB FINISH <u>1:45 AM</u>
LEASE <u>CAROL</u>	WELL # <u>1-32</u>	LOCATION <u>YDCEMENTO N TO COLINE</u>			COUNTY <u>ROCKS</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)				<u>2 1/2 W 1/2 N E 1/4</u>			

CONTRACTOR MURFIN #16
 TYPE OF JOB PRODUCTION STRING
 HOLE SIZE 7 7/8 T.D. 3800
 CASING SIZE 5 1/2 DEPTH 3799
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 1000# MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 13²³
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 92 1/4 BBL

OWNER _____
 CEMENT
 AMOUNT ORDERED 700 ASC 2.90 GEL
500 GAL WFR-2

EQUIPMENT
 PUMP TRUCK CEMENTER MARK
 # 345 HELPER DAVE
 BULK TRUCK
 # 160 DRIVER SHANE
 BULK TRUCK
 # _____ DRIVER _____

COMMON _____	@ _____	_____
POZMIX _____	@ _____	_____
GEL <u>4</u>	@ <u>10.00</u>	<u>40.00</u>
CHLORIDE _____	@ _____	_____
<u>ASC 200</u>	@ <u>8.50</u>	<u>1,700.00</u>
<u>WFR-2 500 gal.</u>	@ <u>1.00</u>	<u>500.00</u>
_____	@ _____	_____
_____	@ _____	_____
HANDLING <u>204</u>	@ <u>1.10</u>	<u>224.40</u>
MILEAGE <u>.04/314/mi.</u>	_____	<u>195.84</u>

TOTAL 2,660.24

REMARKS:

SERVICE

15 SKS C.R.H.
10 SKS @ M.N.
P COLLAR @ 1584 JT # 55
FLOAT HELD
PUMPED 25 BBL WATER AHEAD OF CEMENT
5 10 BBL FLUSH TANK

DEPTH OF JOB _____	_____
PUMP TRUCK CHARGE _____	<u>1,130.00</u>
EXTRA FOOTAGE _____	@ _____
MILEAGE <u>24</u>	@ _____ <u>72.00</u>
PLUG <u>5 1/2 TRP</u>	@ _____ <u>60.00</u>
_____	@ _____
_____	@ _____

TOTAL 1,262.00

CHARGE TO: TREIGH
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>5 1/2</u>	_____
<u>GUIDE SHOE</u>	@ _____ <u>150.00</u>
<u>INSERT</u>	@ _____ <u>235.00</u>
<u>8 CENT</u>	@ <u>50.00</u> <u>400.00</u>
<u>18-SCRATCHERS (RECI)</u>	@ <u>35.00</u> <u>630.00</u>
<u>PORT COLLAR</u>	@ <u>1250.00</u> <u>1250.00</u>
<u>BASKET</u>	_____ <u>128.00</u>

TOTAL 3,293.00

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 * Good Job than ks
Niall Avison

NIALL AVISON
 PRINTED NAME

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH. (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

*Posted
 11-15-02*

 * I N V O I C E *

15-163-23357-00-00

Invoice Number: 088508

Invoice Date: 11/15/02

Sold Trich Production, Inc.
 To: P. O. Box 1408
 Longview, TX
 75606

Cust I.D.....: Trich
 P.O. Number...: Carol 1-32
 P.O. Date.....: 11/15/02

Due Date.: 12/15/02
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	144.00	SKS	6.6500	957.60	E
Pozmix	96.00	SKS	3.5500	340.80	E
Gel	12.00	SKS	10.0000	120.00	E
FloSeal	60.00	LBS	1.4000	84.00	E
Handling	350.00	SKS	1.1000	385.00	E
Mileage (25)	25.00	MILE	14.0000	350.00	E
<i>350 sks @\$.04 per sk per mi</i>					
<u>Port Collar</u>	1.00	JOB	630.0000	630.00	E
Mileage pmp trk	25.00	MILE	3.0000	75.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ *294.24*
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2942.40
 Tax.....: 0.00
 Payments: 0.00
 Total....: 2942.40

- 294.24

*pd.
 1-7-03
 ch. #1251*

Rec. 11-18-02'

ALLIED CEMENTING CO., INC. 11564

Federal Tax I.D.# ~~02-22220~~

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

15-163-23357-00-00

SERVICE POINT: K

DATE <u>11-04-02</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>1:15 PM</u>	JOB FINISH <u>2:00 PM</u>
LEASE <u>CAROL</u>	WELL # <u>1-3Z</u>	LOCATION <u>YBCEMENTO RD AL TO CO LINE</u>			COUNTY <u>HOOKS</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>3W 1/2 N</u>				

CONTRACTOR MURFIN

TYPE OF JOB PORT COLLAR

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2" DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL X-PERT DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT

AMOUNT ORDERED 350 60/40 670 GEL

1/4# FLOEAL

USED 240 SKS

COMMON	<u>144</u>	@	<u>665</u>	<u>957.60</u>
POZMIX	<u>96</u>	@	<u>355</u>	<u>340.80</u>
GEL	<u>12</u>	@	<u>10.00</u>	<u>120.00</u>
CHLORIDE		@		
<u>FLOEAL</u>	<u>60#</u>	@	<u>140</u>	<u>84.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>350</u>	@	<u>110</u>	<u>385.00</u>
MILEAGE	<u>44/SK</u>	@	<u>mile</u>	<u>350.00</u>
				TOTAL <u>2237.40</u>

EQUIPMENT

PUMP TRUCK CEMENTER MARK

345 HELPER DAVE

BULK TRUCK

362 DRIVER CLEN

BULK TRUCK

_____ DRIVER _____

REMARKS:

PRES. CSG TO 1000# OPENED TOOL
BROKE CTRC MIXED 240 SKS - CTRC
CEMENT - REPLACED SBBL - CLOSED TOOL
RAN 5 ITS WASHED CLEAN

THANKS

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 630.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 25 @ 3.00 75.00

PLUG _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 705.00

CHARGE TO: TRICH

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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.

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE _____

(Handwritten Signature)

PRINTED NAME _____