

**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 # 5208
 Name: Exxon Mobil Corporation
 Address: P. O. Box 4358
 City/State/Zip: Houston, TX 77210-4358
 Purchaser: _____
 Operator Contact Person: Linda Koch
 Phone: (281) 654-1931
 Contractor: Name: Schlumberger
 License: N. A.
 Wellsite Geologist: N. A.
 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: Exxon Mobil Corporation
 Well Name: C. A. Loucks "B" Unit #3
 Original Comp. Date: 08/30/89 Original Total Depth: 3042'
 _____ 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. _____
 Spud: 03/31/97 04/04/97 01/16/04
 Spud Date or _____
 Recompletion Date _____ Date Reached TD _____ Completion Date or _____
 Recompletion Date _____

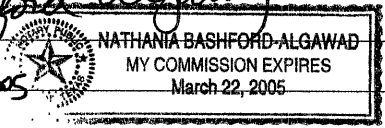
API No. 15 - 093-21554 - 0001
 County: Kearny
Ne. Ne. nw Sec. 28 Twp. 25s S. R. 35 East West
605 feet from S / (circle one) Line of Section
2548 feet from E / (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: C. A. Loucks "B" Unit Well #: 3
 Field Name: Hugoton
 Producing Formation: Chase
 Elevation: Ground: 3000' Kelly Bushing: 3009'
 Total Depth: 2795' Plug Back Total Depth: 2743'
 Amount of Surface Pipe Set and Cemented at 818 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 owwo KCR 6/13/07
 (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: Linda Koch
 Title: Contract Completions Admin. Date: 07/19/04
 Subscribed and sworn to before me this 19 day of June,
2004.
 Notary Public: Nathanial Bashford Algowad
 Date Commission Expires: March 22, 2005



KCC Office Use ONLY

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

Operator Name: Exxon Mobil Corporation Lease Name: C. A. Loucks "B" Unit Well #: 3
 Sec. 28 Twp. 25s S. R. 35 East West County: Kearny

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:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

CASING RECORD <input 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	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	24#	818'	Class C	425	50:50 C/Poz
Intermediate							
Production	7-7/8"	5-1/2"	14#	2787'	Class C	300 sx	3% d79 & 2% b28

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
		Frac well w/100,000 gals 80Q WF130 @	2496 to
		80 bpm & N2 Flush @ 64 bpm	2678 (o/a)

TUBING RECORD		Size	Set At	Packer At	Liner Run
None				None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
			<input checked="" 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) _____

Service Contract Receipt



SCHLUMBERGER TECHNOLOGY CORPORATION

Job Number
2205543990

Invoice Mailing Address:
EXXON MOBIL CORPORATION

200 WEST 47TH STREET
HUGOTON, KS
US

RECEIVED
KANSAS CORPORATION COMMISSION

JUL 20 2004

CONSERVATION DIVISION
WICHITA, KS

LEFT DISTRICT	Date	1/13/2004	Time	4:00:00 AM
ARRIVE LOCATION	Date	7/13/2004	Time	7:00:00 AM
JOB START	Date	7/13/2004	Time	9:45:00 AM
JOB COMPLETION	Date	7/13/2004	Time	10:28:00 AM
LEAVE LOCATION	Date	7/13/2004	Time	11:30:00 AM
ARRIVED DISTRICT	Date	7/13/2004	Time	8:00:00 PM

Service Instructions
Frac w/100,000 gal 80Q WF130 @ 80 BPM
N2 Flush 64 BPM

Service Description
Fracturing - Frac,N2Foam/Energized

Customer PO	Contract	AFE	Rig
Well	State/Province	County/Parish/Block	Legal Location
CA Loucks B3	KS	Kearny	Sec 28 25S 35W
Field	Customer or Authorized Representative		
	REP, EXXON,		

THE ESTIMATED CHARGES AND DATA SHOWN BELOW ARE SUBJECT TO CORRECTION BY SCHLUMBERGER.

Item	Description	Quantity	Unit	Unit Price	Disc	Amount
Services						
102325001	Tds Including Post Trt Docum	1	JOB	1,440.00	72.0%	403.20
28021001	Pump Rated Btwn 651-1000 hhp	1	EA	5,680.00	72.0%	1,590.40
28400011	Blender, 11-20 bpm	1	EA	1,820.00	72.0%	509.60
28567050	N2 Pump 0-5k psi High Rate	4	EA	3,560.00	72.0%	3,987.20
28570000	Nitrogen Transport Time Charge	2	HR	162.00	72.0%	90.72
58576000	Truck Mounted Hoist W/Suc	1	JOB	765.00	72.0%	214.20
59200002	Mileage, All Other Equipment	1600	MI	5.17	72.0%	2,316.16
Services Subtotal:						32,541.00
Discount:						23,429.52
Estimated Total (USD):						9,111.48
Products						
102946000	Fuel Surcharge	1	EA	488.12	0.0%	488.12
B069	Biocide B69	6	LB	177.00	72.0%	297.36
B142	Surry Gel B142	150	GA	51.90	72.0%	2,179.80
F052	Foaming Agent F52	90	GA	61.25	72.0%	1,543.50
J134L	Breaker, Enzyme J134L	1	GA	2,055.00	72.0%	575.40
N002	Nitrogen N2	1146667	CF	0.03	68.0%	11,743.82
Products Subtotal:						63,602.04
Discount:						36,774.05
Estimated Total (USD):						16,827.99
Total (before Discount):		36,143.04				
Discount:		60,203.57				
System Discount:				Estimated Discounted Total (USD):		
				28,939.47		

Service Contract Receipt



SCHLUMBERGER TECHNOLOGY CORPORATION

Job Number
2205543998

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Field	Customer or Authorized Representative REP, EXXON,		

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Item	Description	Quantity	Unit	Unit Price	Disc	Amount
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THE ESTIMATED CHARGES AND DATA SHOWN ABOVE ARE SUBJECT TO CORRECTION BY SCHLUMBERGER.

THE SERVICES, EQUIPMENT, MATERIALS AND /OR PRODUCTS PROVIDED BY THIS SERVICE CONTRACT RECEIPT HAVE BEEN PERFORMED OR RECEIVED AS SET FORTH ABOVE.

Signature of Customer or Authorized Representative:

[Signature]
REP, EXXON,

Date: 7/13/04

Signature of Schlumberger Representative:

[Signature]
Torres, Octavio

RECEIVED
KANSAS CORPORATION COMMISSION

JUL 20 2004

CONSERVATION DIVISION
WICHITA, KS