

**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 # 33019
 Name: ROSEWOOD RESOURCES, INC.
 Address: 2711 N. Haskell Ave., Suite 2800
 City/State/Zip: Dallas, Texas
 Purchaser: _____
 Operator Contact Person: Stacey Owston
 Phone: (970) 848-2228
 Contractor: Name: Coil Tubing Solutions/Schaal Drilling
 License: 33445/33229
 Wellsite Geologist: Steven VonFeldt
 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 (WOPL or Enhr.?) Docket No. _____

<u>07/08/2004</u>	<u>07/21/2004</u>	<u>08/06/2004</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 181-20354-00-00
 County: Sherman
NE SW SE SW Sec. 34 Twp. 8 S. R. 40 East West
638 feet from (S) (circle one) Line of Section
1850 feet from (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW (SW)
 Lease Name: Topliff Well #: 1-34
 Field Name: Goodland
 Producing Formation: Niobrara
 Elevation: Ground: 3738' Kelly Bushing: 3744'
 Total Depth: 1350' Plug Back Total Depth: 1347'
 Amount of Surface Pipe Set and Cemented at 351' csg @ 350 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 ALT IWHM
(Data must be collected from the Reserve Pit) 2-26-07
 Chloride content 5000 ppm Fluid volume 220 bbls
 Dewatering method used Evaporation
 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: Stacey Owston
 Title: Adm. Assistant Date: 01-12-05
 Subscribed and sworn to before me this 12 day of JANUARY,
2005
 Notary Public: Carolyn J. Copley
 Date Commission Expires: 10-16-2004

KCC Office Use ONLY

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



Operator Name: ROSEWOOD RESOURCES, INC. Lease Name: Topliff Well #: 1-34
 Sec. 34 Twp. 8 S. R. 40 East West County: Sherman

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:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">Log</td> <td style="width:40%;">Formation (Top), Depth and Datum</td> <td style="width:30%;">Sample</td> </tr> <tr> <td>Name</td> <td>Top Datum</td> <td></td> </tr> <tr> <td>Niobrara</td> <td>1102'</td> <td></td> </tr> </table>	Log	Formation (Top), Depth and Datum	Sample	Name	Top Datum		Niobrara	1102'	
Log	Formation (Top), Depth and Datum	Sample								
Name	Top Datum									
Niobrara	1102'									

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	8"	5 1/2"	14#	351'	Neat	48	3% cc, flowseal
Production/tubing		2 7/8"	6.5#	1334'	ASC	50	22% gel, flowseal

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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	
2	1102' TO 1136'	Frac w/ 48,019 gas MavFoam 30 100,000#	
		16/30 brady sand & 145,000 scf N2	

TUBING RECORD		Size	Set At	Packer At	Liner Run	Yes	✓ No
None							
Date of First, Resumed Production, SWD or Enhr.			Producing Method				
SIGW-Waiting on Pipeline			✓ 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 Open Hole Perf. Dually Comp. Commingled
 (If vented, Submit ACO-18.) Other (Specify) _____

ALLIED CEMENTING CO., INC.

13893

Federal Tax I.D.# ~~000000~~

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

SERVICE POINT: Oshtemo

DATE 7-21-04	SEC 34	TWP. 8s	RANGE 40w	CALLED OUT	ON LOCATION 6:00 AM	JOB START 12:30 PM	JOB FINISH 1:00 PM
LEASE 7001.54	WELL # 1-34	LOCATION Goodland 1 1/2 S 2 1/2 W N 8			COUNTY Sherman	STATE KS	
OLD OR NEW (Circle one)							

CONTRACTOR CTS 114

TYPE OF JOB Cement in 2 1/2" Tub

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE 2 1/2" DEPTH 1346.24'

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1800' MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 8 Bbls

OWNER 39ME

CEMENT

AMOUNT ORDERED 50 SKS ASC 2% Gel 1/2" Flo Seal

COMMON	<u>50 SKS</u>	@	<u>10.35</u>	<u>517.50</u>
POZMIX		@		
GEL	<u>1 SKS</u>	@	<u>11.00</u>	<u>11.00</u>
CHLORIDE		@		
	<u>Flo Seal 13'</u>	@	<u>1.40</u>	<u>18.20</u>
		@		
		@		
		@		
HANDLING	<u>51</u>	@	<u>1.25</u>	<u>63.75</u>
MILEAGE	<u>59/5K/mile</u>			<u>153.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Dean

373-281 HELPER Andrew

BULK TRUCK

377 DRIVER Larry

BULK TRUCK

_____ DRIVER _____

TOTAL 763.45

REMARKS:

SERVICE

Cemented in 2 1/2" tub w/ 50 SKS
ASC 2% Gel 1/2" Flo Seal Wash
TKD Line, Disp 8 Bbls Plug
Landed 1800'
Flo Seal

DEPTH OF JOB	<u>1346.24'</u>		
PUMP TRUCK CHARGE			<u>520.00</u>
EXTRA FOOTAGE	<u>1046'</u>	@	<u>.50</u> <u>523.00</u>
MILEAGE	<u>60 mile</u>	@	<u>4.00</u> <u>240.00</u>
PLUG		@	
		@	
		@	

TOTAL 1289.00

CHARGE TO: Rosewood Resources

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

Guide shoe	@	<u>160.00</u>
Latch Drum Plug Ass	@	<u>305.00</u>
3 - Centralizers	@	<u>70.00</u> <u>210.00</u>
6 - Scrubbers	@	<u>55.00</u> <u>330.00</u>
	@	

TOTAL 1005.00

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 Franklin

PRINTED NAME