

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 30555
Name: John Herrick
Address: 223 Megan Lane
City/State/Zip: Ottawa, KS. 66067
Purchaser: Plains Resources
Operator Contact Person: John Herrick
Phone: (785) 242-6423
Contractor: Name: Town Oil Co.
License: 6142
Wellsite Geologist: none

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW injection well*
 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. _____
7-14-00 7-18-00 7-18-00
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 121-27516-00-00
County: Miami
N W S E NE NE Sec. 30 Twp. 17 S. R. 22 East West
3390 3654' feet from S / Line of Section
1415 1183' feet from E / Line of Section
KCC

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Lowe Well #: 1A

Field Name: unknown
Producing Formation: Peru Sand

Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 437 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 30 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 30
feet depth to surface w/ 4 sx cmt.

Drilling Fluid Management Plan Alt. #2 RGR 7/9/07
(Data must be collected from the Reserve Pit)

Chloride content app 1500-3000 ppm Fluid volume 80 bbls
Dewatering method used used on lease

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: [Signature]
Title: Partner Date: _____



Kimberly D. Littlejohn
Oklahoma County
Notary Public in and for
State of Oklahoma

KCC Office Use ONLY

Subscribed and sworn to before me this 8th day of September,
2000.
Notary Public: Kimberly D. Littlejohn
Date Commission Expires: 11-3-2002

If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: John Herrick Lease Name: Lowe Well #: 1A
 Sec. 30 Twp. 17 S. R. 22 East West County: Miami

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:

Gamma Ray/Neutron

Log Formation (Top), Depth and Datum Sample

Name Top Datum

See attached copy of log

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	# Sacs Used	Type and Percent Additives
Surface	9 1/2	7		30	Portland	4	
Completion	5 1/4	2" upset		427.40	Poz	64	

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
2	368-378	spot acid on perfs and breakdown w/250 gallons of acid	
	waiting on kcc approval for inejction		

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

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

ORIGINAL

Well #1A
 Farm: Lowe
 Miami County, KS
 Lease Owner: John Herrick

WELL LOG

<u>Thickness of Strata</u>	<u>Formation</u>	<u>Total Depth</u>
0	Soil & clay	30
10	Shale	40
19	Lime	59
24	Shale	83
7	Lime	90 Paola
2	Shale	92
2	Red bed	94
36	Shale	130
17	Lime	147 Hard/Drum
9	Shale	156
28	Lime	184 Hard/Winterset
9	Shale & slate	193
23	Lime	216 Hard/Bethany Falls
5	Shale & slate	221
4	Lime	225 Snibar
4	Shale	229
7	Lime	236 Hertha
4	Dk. shale	240
6	Shale & shells	246
24	Grey shale	270
4	Sand & shale	274 Grey/No Show/Knobtown
85	Sandy shale	359
1	Slate	360
3	Shale grey	363
4	White shale	367
1	Sandy shale	368 Oil sand
1	Sandy lime	369 Oil show
12	Sand	381 Dk Brown/Heavy oil show
2	Sandy lime	383 No show
6	Sand	389 Dk Brown/Heavy oil show
4	Sandy lime	392 No show
15	Lime shells	407
30	Shale	437 TD

ORIGINAL

CONSOLIDATED INDUSTRIAL SERVICES, INC.
211 W. 14TH STREET, CHANUTE, KS 66720
316-431-9210 or 800-467-8676

TICKET NUMBER 07413

LOCATION Ottawa

FOREMAN Alan Maden

TREATMENT REPORT

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
7-18-00	3776	howe #1-A		30	17	22	MI	
CHARGE TO <u>Robert Harwell</u>				OWNER				
MAILING ADDRESS <u>2801 N.W. Expy Ste 132</u>				OPERATOR <u>John Herrick</u>				
CITY <u>Oklahoma City</u>				CONTRACTOR <u>Town Drilling</u>				
STATE <u>OK</u>		ZIP CODE <u>73112</u>		DISTANCE TO LOCATION <u>20</u>				
TIME ARRIVED ON LOCATION <u>3:00</u>				TIME LEFT LOCATION <u>4:00</u>				

WELL DATA	
HOLE SIZE	<u>5 7/8</u>
TOTAL DEPTH	<u>437</u>
CASING SIZE	<u>236</u>
CASING DEPTH	<u>427'</u>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORITICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Established pump rate. Mixed & pumped 2sx gel followed by app 3 bbl clean water. Mixed and pumped 64 sx 50/50/2oz, 220 gel. Circulated com to surface. Flushed pump clean. Pumped 2" rubber plug to TD with clean water. Well held 750# PSI for 30 minute MIT

Alan Maden

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE x PRESSURE x 40.8	

AUTHORIZATION TO PROCEED

TITLE

DATE

ALL THE TERMS AND CONDITIONS STATED ON THE REVERSE SIDE ARE INCORPORATED AS PART OF THIS SALE.