

ORIGINAL

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

Operator: License # 32906
Name: T & R Well Service
Address: P.O. Box 432
City/State/Zip: Fredonia, KS 66736
Purchaser: _____
Operator Contact Person: Robin Pierpoint
Phone: (620) 228-0104 Cell (620) 625-2463
Contractor: Name: Little Joe Oil Company
License: 30638
Wellsite Geologist: _____

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. _____

8-4-04 8-16-04 8-23-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 205 - 25813 - 0000
County: Wilson
SE SW NESW Sec 1 Twp. 29 S. R. 14 East West
1607 feet from S N (circle one) Line of Section
1748 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Pierpoint Well #: 40
Field Name: Fredonia
Producing Formation: Bartlesville

Elevation: -Ground: 849 - Kelly Bushing: _____
Total Depth: 1132 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 40 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 #2 KJR 6/19/07
(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.: _____

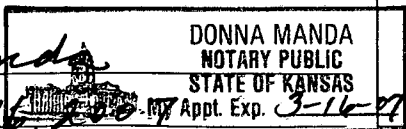
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INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 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: Rob W. Pirt
Title: Operator Date: 9-21-04
Subscribed and sworn to before me this 21st day of September

10x2004
Notary Public: Donna Manda
Date Commission Expires: March 16, 2007 Appt. Exp. 3-16-07



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

11/11/2010

Operator Name: T & R Well Service Lease Name: Pierpoint Well #: 40

Sec. 1 Twp. 29 S. R. 14 East West County: Wilson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum see attached
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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	# Sacjs Used	Type and Percent Additives
Surface	11	7		40'	Portland	10	
Production	5-3/4	2-7/8		1119'	Oil Well Cement	129	2 sks gel 1 sk flosea

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	Producing Method
	<input type="checkbox"/> Flowing <input checked="" 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
	1				

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



CONSOLIDATED OIL WELL SERVICES, INC.

211 W. 14th P.O. Box 884 Wichita, KS 67201 • (316) 241-9400 • 800-361-8677

08/23/04 00192161

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SOUTH PRAIRIE PETRO.
& ROBIN PIERPONT
P O BOX 432
FREDONIA KS 66736-0432

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

PLANT NO.	NO.	LOCATION	DATE AND WELL NO.	DATE OF JOB	TICKET NO.	AMOUNT	DATE
5401				1.0000			
5407				1.0000			
1118				2.0000			
1107				1.0000			
1123				2.9400			
5501C				2.5000			
3126				129.0000			
4402				1.0000			
5406				28.0000			
GROSS INVOICE				TAX		103.46	
2853.04						2956.52	

DATE: 8-4-04

CUSTOMER Robin Pierpont
ADDRESS P.O. Box 732 FREDONIA, KS 66732

P.O. # _____ LOCATION _____
ARRIVAL TIME: _____ DEPARTURE TIME: _____ TEMPERATURE _____

TERMS: Net cash payable in 10 days - 1 1/2% Interest on unpaid balance after 30 days

QUANTITY	MATERIAL	PRICE	AMOUNT
20	skt cement	6 ⁰⁰	120 ⁰⁰

WATER ADDED ON JOB _____ GALS. _____

MILEAGE _____ MILES @ _____

CHARGES ON ORDERS UNDER 2 YRS. \$ _____

DRIVER D.L.

CUSTOMERS ACCEPTANCE

NOTICE: All claims if any, must be made on receipt of goods. Purchaser assumes all liability and responsibility for concrete and damages after truck reaches property line. Extra charges if truck is held more than 5 minutes per cubic yard by customer. If water is added on job buyer assumes responsibility for strength of concrete. We are in no way responsible for complaints of cracks, color, dusting, etc. Concrete may cause bodily harm if not handled properly. The purchaser assumes all risk of such harm upon receipt of the concrete.

SIGN HERE Robin Pierpont

SUB TOTAL	120 ⁰⁰
SALES TAX	7 ⁵⁶
TOTAL	127 ⁵⁶
NO.	3741

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