

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 # 30076
Name: A & A PRODUCTION
Address: PO BOX 100
City/State/Zip: HILL CITY KS 67642
Purchaser: _____
Operator Contact Person: ANDY ANDERSON
Phone: (785) 421-6266
Contractor: Name: A & A PRODUCTION
License: HAFNER 30076
Wellsite Geologist: JERRY GREEN

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>6-6-00</u>	<u>6-16-00</u>	<u>6-16-00</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 179-21102-0000

County: SHERIDAN

N/2-SW-NW Sec. 5 Twp. 10 S. R. 26 East West

1520 feet from S N (circle one) Line of Section

720 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: HAFNER Well #: 2

Field Name: SKY SOUTH DISC

Producing Formation: _____

Elevation: Ground: 2645 Kelly Bushing: _____

Total Depth: 4130 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 200 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 PJA KJR 7/10/07
(Data must be collected from the Reserve Pit)

Chloride content 9,000 ppm Fluid volume 250 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: Andy Anderson
Title: Owner Date: 6-27-00

Subscribed and sworn to before me this 27th day of JUNE

2000.
Notary Public: Rita A. Anderson

Date Commission Expires: January 21, 2004

RECEIVED
STATE CORPORATION COMMISSION
Wichita, Kansas
JUN 30 2000
RITA A. ANDERSON
Graham County, Kansas
My Appt. Exp. 1-21-04

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

Operator Name: A & A PRODUCTION Lease Name: HAFFNER Well #: 2
 Sec. 5 Twp. 10 S. R. 26 East West County: SHERIDAN

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: Radiation Board

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Anhydrite	2207	- 58
Topeka	3626	- 976
Heebner	3838	-1188
Toronto	3862	-1212
Lansing-KC	3878	-1228
Lansing-KC Base	4104	-1454
RTD	4130	-1480

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	12 1/4	8 5/8	20	205	60-40 POZ Mix	140	3% CC 2% GEL

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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input 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 _____

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

 * ORIGINAL *
 * INVOICE *

Invoice Number: 081534

Invoice Date: 06/16/00

Sold A & A Production
 To: P. O. Box 100
 Hill City, KS
 67642

Due Date.: 07/16/00
 Terms.....: Net 30

Cust I.D.....: A&APro
 P.O. Number...: Haffner #2
 P.O. Date.....: 06/16/00

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	111.00	SKS	7.5500	838.05	E
Pozmix	74.00	SKS	3.2500	240.50	E
Gel	10.00	SKS	9.5000	95.00	E
FloSeal	46.00	LBS	1.1500	52.90	E
Handling	185.00	SKS	1.0500	194.25	E
Mileage (46)	46.00	MILE	7.4000	340.40	E
185 sks @\$.04 per sk per mi					
Plug	1.00	JOB	470.0000	470.00	E
Mileage pmp trk	46.00	MILE	3.0000	138.00	E
Dryhole plug	1.00	EACH	23.0000	23.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 239.21
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2392.10
 Tax.....: 0.00
 Payments: 0.00
 Total....: 2392.10

ALLIED CEMENTING CO., INC.

5588

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

SERVICE POINT:

ORIGINAL

OAKLEY

DATE 6-16-00	SEC 5	TWP. 10S	RANGE 26W	CALLED OUT	ON LOCATION 6:30 PM	JOB START 9:30 AM	JOB FINISH 11:30 PM
LEASE HAFFNER	WELL # 2	LOCATION QUANTER 10N-1W			COUNTY GOVE	STATE KS	
OLD OR NEW (Circle one)					SHERMAN		

CONTRACTOR CO. TOOLS

TYPE OF JOB PTA

HOLE SIZE 7 7/8" T.D. 4131'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 2266'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER SAME

CEMENT AMOUNT ORDERED 185 SKS 60/40 POZ GEL CHLORIDE #Flt

COMMON	111 SKS	@	7.55	838.05
POZMIX	74 SKS	@	3.25	240.50
GEL	10 SKS	@	9.50	95.00
CHLORIDE		@		
	Flt-Sex	@	1.15	52.70
		@		
		@		
		@		
		@		
HANDLING	185 SKS	@	1.05	194.25
MILEAGE	44.75	@	7.80	349.00
TOTAL				1,761.10

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

191 HELPER DEAN

BULK TRUCK

303 DRIVER LONNIE

BULK TRUCK

_____ DRIVER _____

REMARKS:

25 SKS AT 2266'

100 SKS AT 1350'

40 SKS AT 250'

10 SKS AT 40'

10 SKS AT HOLE

SERVICE

DEPTH OF JOB 2266'

PUMP TRUCK CHARGE 470.00

EXTRA FOOTAGE @ _____

MILEAGE 46 miles @ 3.00 138.00

PLUG 8 7/8 DRY HOLE @ _____ 23.00

@ _____

@ _____

THANK YOU

TOTAL 631.00

CHARGE TO: A+A Production

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 David Anderson

PRINTED NAME

ORIGINAL

ALLIED CEMENTING CO., INC.

P.O. BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566

* I N V O I C E *

Invoice Number: 081428

Invoice Date: 06/06/00

Sold A & A Production
To: P. O. Box 100
Hill City, KS
67642

Cust I.D.....: A&APro
P.O. Number...: Haffner #2
P.O. Date.....: 06/06/00

Due Date.: 07/06/00
Terms....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	84.00	SKS	7.5500	634.20	E
Pozmix	56.00	SKS	3.2500	182.00	E
Gel	3.00	SKS	9.5000	28.50	E
Chloride	5.00	SKS	28.0000	140.00	E
Handling	140.00	SKS	1.0500	147.00	E
Mileage (46)	46.00	MILE	5.6000	257.60	E
140 sks @\$.04 per sk per mi		JOB	470.0000	470.00	E
Surface	1.00	MILE	3.0000	138.00	E
Mileage pmp trk	46.00	EACH	45.0000	45.00	E
Surface plug	1.00				

All Prices Are Net, Payable 30 Days Following
Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 204.23
30 days from Invoice Date

Subtotal: 2042.30
Tax.....: 0.00
Payments: 0.00
Total.....: 2042.30

ALLIED CEMENTING CO., INC.

1325

ORIGINAL

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

SERVICE POINT:
OAKLEY

DATE <u>6-6-00</u>	SEC. <u>5</u>	TWP. <u>10S</u>	RANGE <u>26W</u>	CALLED OUT	ON LOCATION <u>3:15 PM</u>	JOB START <u>4:00 PM</u>	JOB FINISH <u>4:30 PM</u>
LEASE <u>HAFFNER</u>	WELL# <u>2</u>	LOCATION <u>QUARTER 10N-1W</u>		COUNTY <u>SHERTON</u>	STATE <u>KS</u>		
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR CO TOOLS

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4" T.D. 210'

CASING SIZE 8 5/8" DEPTH 210'

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15'

PERFS.

DISPLACEMENT

OWNER SAME

CEMENT

AMOUNT ORDERED 140 SKS 60/40 POZ 38CC POZ GEL

COMMON	<u>84 SKS</u>	@ <u>7.55</u>	<u>634.20</u>
POZMIX	<u>56 SKS</u>	@ <u>3.25</u>	<u>182.00</u>
GEL	<u>3 SKS</u>	@ <u>9.50</u>	<u>28.50</u>
CHLORIDE	<u>5 SKS</u>	@ <u>28.00</u>	<u>140.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

300 HELPER WAYNE

BULK TRUCK

303 DRIVER LONNIE

BULK TRUCK

DRIVER

HANDLING	<u>140 SKS</u>	@ <u>1.05</u>	<u>147.00</u>
MILEAGE	<u>49 per mile per SKS</u>		<u>237.60</u>

TOTAL 1389.30

REMARKS:

CEMENT DEP CIRC.

SERVICE

DEPTH OF JOB	<u>210'</u>		
PUMP TRUCK CHARGE			<u>470.00</u>
EXTRA FOOTAGE	@		
MILEAGE	<u>46 miles</u>	@ <u>3.00</u>	<u>138.00</u>
PLUG	<u>8 5/8 SURFACE</u>	@	<u>45.00</u>

Thank You

TOTAL 653.00

CHARGE TO: AAA 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 Don Anderson

PRINTED NAME