

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 # 6039
Name: L. D. Drilling, Inc.
Address: 7 SW 26th Avenue
City/State/Zip: Great Bend, KS 67530
Purchaser: _____
Operator Contact Person: L. D. Davis
Phone: (620) 793-3051
Contractor: Name: Express Well Service
License: 6426
Wellsite Geologist: _____

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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: Amerada Petroleum Corporation
Well Name: E. J. Schultz #3
Original Comp. Date: 9-25-46 Original Total Depth: 3604'
____ 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. _____
3-9-04 3-11-04 3-25-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 009-07134-00-01
County: Barton
NE SE NE Sec. 8 Twp. 19 S. R. 15 East West
1650 feet from S N (circle one) Line of Section
330 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Miller "CC" OWWO Well #: 1
Field Name: Otis - Albert

Producing Formation: Herrington-Krider
Elevation: Ground: 1980' Kelly Bushing: 1985'
Total Depth: 2015' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at _____ 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 KCC 06/07/07
(Data must be collected from the Reserve PII)
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: Russell Dewarff
Title: Secretary/Treasurer Date: 6-3-04
Subscribed and sworn to before me this 3rd day of June,
20 04.
Notary Public: Rashell Patten
Date Commission Expires: 2/2/07



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

ORIGINAL

Operator Name: L. D. Drilling, Inc. Lease Name: Miller "CC" OWWO Well #: 1
 Sec. 8 Twp. 19 S. R. 15 East West County: Barton

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

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Gamma Ray/Neutron Cement Bond Log

CASING RECORD <input type="checkbox"/> New <input checked="" 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
Production		4 1/2"	10.5#	2015'	50/50 Poz	200	Cal Set, Gil, Salt

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
	10 shots 3 3/8 HEC 1886-1891	1000 gal 15% NE/FE	
	20 shots 3 3/8 HEC 1870-1880	1500 gal 15% FE/NE	

TUBING RECORD Size 2 3/8" Set At 2014' Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Enhr. Not Successful Producing Method Flowing Pumping Gas Lift 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, Submit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____ Production Interval _____



TREATMENT REPORT

ORIGINAL

Customer ID	Date
Customer L.D. Drly Inc	3-11-04
Lease Miller CC	Lease No.
	Well # 1

Field Order # 8230	Station Pratt KS	Casing 4 1/2	Depth 2015	County Barton	State KS
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Type Job Longstring OWWO	Formation	Legal Description 8-190-150
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PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 4 1/2	Tubing Size	Shots/Ft		Acid 200ski, 50-50 por 2%	Gel	RATE	PRESS	ISIP
Depth 2003	Depth PBTD	From	To	Pre Pad 5# Calset 5# Gil	Pro Salt		1000	5 Min.
Volume 32.4	Volume	From 1.43	To 14.2 ppg	Pad 3.5 FR .8 FLA-3	Min 2.1% D.A			10 Min.
Max Press 1000	Max Press	From	To	Fluo 49.8 Bbl; LS		Avg		15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush 0.1 mudf/w h		Gas Volume		Total Load

Customer Representative L.D. David	Station Manager Dave Aitry	Treater D. Scott
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Service Units	118	46	57	47	76			
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1500					On Loc w/Trk; Safety mtg Guide Shoe Bottom ISFV w/Fill To Cent 2-4-6-8 Basket #2 Csg on Bottom Drop Ball
1120	150		20	3	St 290 KCL Flush
1126	250		12	3	st mud Flush
1129	200		5	3	H2O spacer
1131	250		49	4	mix Cmt @ 14.2 ppg 200ski
1148	0		10	3	Close In + Wash Pump line
1152	0			4	Release Plug + St Disp w/H2O
1155	150		18	4	18 Bbl; Disp out Lift Cmt
1201	800		33	0	Plug Down + psi Test 1.5g
1203	0				Release psi float held Good Circ Thru Job
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					Job Complete Thank you Scotty



ORIGINAL

FIELD ORDER 8230

INVOICE NO.	Subject to Correction		
Date 3-11-04	Lease Miller CC	Well # 1	Legal 8-19s-15w
Customer ID 3-11-04	County Barton	State KS	Station Pratt, KS
L.D. Drilling Inc		Depth TP=2016' 9.5 ppf	Shoe Joint 12.21
Casing 4 1/2	Casing Depth 2015	TD 2015	Job Type Longstring OWWO
Customer Representative L.D. Davis		Treater D. Scott	

AFE Number	PO Number	Materials Received by X L.D. Davis By D. Scott
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Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
2204	200ski	50-50 por Common	✓			
311	1,008 lb.	Cal Set	✓			
321	1,000 lb.	Gilsonite	✓			
221	992 lb.	Salt fine	✓			
244	42 lb.	Cmt Friction Reducer	✓			
195	135 lb.	FLA-322	✓			
243	17 lb.	Defoamer	✓			
100	4 ea	Centralizers 4 1/2"	✓			
190	1 ea	Guide Shoe 11"	✓			
230	1 ea	ISFV w/Fill 11"	✓			
E147	1 ea	Top Sweeper Plug 11"	✓			
E120	1 ea	Cmt Basket 11"	✓			
302	500 gal	mud flush	✓			
E160	1 ea	Trk mi lway 60 mi				
E107	200ski	Cmt Serv Chg				
E104	504 tm	Cmt Delv Chg				
R205	1 ea	Pump Charge				
E161	1 ea	Pickup mi 60mi lway				
R701	1 ea	Cmt Head Rental				
R402	1 ea	2 hrs Additional hr				

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Discounted Price = 6167.17

10244 NE Hiway 61 · P.O. Box 8613 · Pratt, KS 67124-8613 · Phone (620) 672-1201 · Fax (620) 672-5383 TOTAL