

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 # 32825
Name: Pioneer Exploration, LTD.
Address: 15603 Kuykendahl Suite 200
City/State/Zip: Houston, Texas 77090-3655
Purchaser: _____

API No. 15 - ⁰⁷⁷~~095~~-21480-00-000
County: Harper
W2 - W2 - NE Sec. 8 Twp. 31 S. R. 8 East West
1320 feet from S (N) (circle one) Line of Section
2310 feet from (E) W (circle one) Line of Section

Operator Contact Person: Shelia R. Bolding
Phone: (281) 893-9400 Ext 234
Contractor: Name: Ace Drilling
License: 33006

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 05 2004

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: B.A. Smith Well #: 38

Wellsite Geologist: _____
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

CONSERVATION DIVISION
WICHITA, KS

Field Name: Spivey Grabs Basal
Producing Formation: Mississippian (Chat)
Elevation: Ground: 1658' Kelly Bushing: 1655
Total Depth: 4500 Plug Back Total Depth: 4447
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.

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. _____

Drilling Fluid Management Plan ALT #1 KJR 7/03/07
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume 320 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Messenger Petroleum
Lease Name: Nicholas SWD License No.: 4706
Quarter _____ Sec. 20 Twp. 30 S. R. 8 East West
County: Kingman Docket No.: D-25703

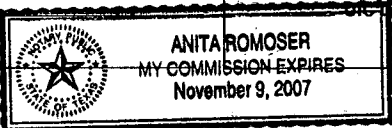
04/27/04 05/06/04 06/16/04
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: Shelia R. Bolding
Title: Regulatory Analyst Date: 4 Oct. 2004
Subscribed and sworn to before me this 4 day of October
20 04
Notary Public: _____
Date Commission Expires: 11/9/09

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



Operator Name: Pioneer Exploration, LTD. Lease Name: B.A. Smith Well: 3-8
 Sec. 8 Twp. 31 S. R. 8 East West County: Harper

ORIGINAL

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 <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 20%;">Top</td> <td style="width: 20%;">Datum</td> </tr> <tr> <td>Howard</td> <td>2905</td> <td>-1241</td> </tr> <tr> <td>Topeka</td> <td>3036</td> <td>-1372</td> </tr> <tr> <td>Heebner</td> <td>3427</td> <td>-1763</td> </tr> <tr> <td>Lansing</td> <td>3629</td> <td>-1965</td> </tr> <tr> <td>Stark Shale</td> <td>4068</td> <td>-2404</td> </tr> <tr> <td>BKC</td> <td>4217</td> <td>-2553</td> </tr> <tr> <td>Cherokee</td> <td>4308</td> <td>-2646</td> </tr> <tr> <td>Mississippian</td> <td>4387</td> <td>-2723</td> </tr> </table>	Name	Top	Datum	Howard	2905	-1241	Topeka	3036	-1372	Heebner	3427	-1763	Lansing	3629	-1965	Stark Shale	4068	-2404	BKC	4217	-2553	Cherokee	4308	-2646	Mississippian	4387	-2723
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CASING RECORD <input checked="" 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	# Sacks Used	Type and Percent Additives
Surface	12-1/4	8-5/8	24.0 J-55	278'	60/40	225	
Long String	7-7/8	4-1/2	10.5 J-55	4514'	ACS	225	

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				

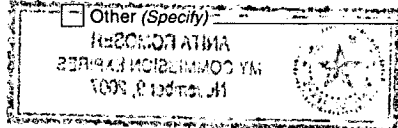
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	4388'-4402'	Acidize 2000 Frac 6700 gals + 4300 # Sd	

TUBING RECORD	Size 2-3/8	Set At 4387	Packer At TAC	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 06/16/04		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. 60	Gas Mcf 300	Water Bbls. 25	Gas-Oil Ratio 5000

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: _____



ALLIED CEMENTING CO., INC. 15196

Federal Tax I.D.# 48-0727860

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

SERVICE POINT:
Medicine Lodge

DATE <u>5-6-04</u>	SEC <u>8</u>	TWP <u>31s</u>	RANGE <u>8w</u>	CALLED OUT <u>10:00 AM</u>	ON LOCATION <u>12:00 PM</u>	JOB START <u>6:00 PM</u>	JOB FINISH <u>6:45 PM</u>
LEASE <u>Smith</u>	WELL # <u>3</u>	LOCATION <u>Mag Plant 74E, 75</u>			COUNTY <u>Harper</u>	STATE <u>Ks.</u>	

CONTRACTOR Ace Drilling
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 4500'
 CASING SIZE 4 1/2 x 10 5 DEPTH 4514'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 1300 MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 43'
 CEMENT LEFT IN CSG. _____
 PERFS. _____

OWNER Pioneer Exploration

CEMENT AMOUNT ORDERED
225 sx ASC + 5' Kcl + 5' Ft-160
500 Gal Mud-clean 7 gal Cla pro

DISPLACEMENT 72 1/2 Obts 27 KCL

COMMON	<u>225 ASC</u>	@	<u>9.50</u>	<u>2137.50</u>
POZ MIX		@		
GEL		@		
CHLORIDE		@		
	<u>Kol Seal 1125'</u>	@	<u>1.50</u>	<u>562.50</u>
	<u>Ft-160 105'</u>	@	<u>8.00</u>	<u>840.00</u>
	<u>Mud clean 500 gal</u>	@	<u>1.00</u>	<u>500.00</u>
	<u>cla pro. 7 gal.</u>	@	<u>22.90</u>	<u>160.30</u>

EQUIPMENT
 PUMP TRUCK CEMENTER Carl Balking
 # 368-265 HELPER Bill III.
 BULK TRUCK DRIVER TANNER F.
 # 242
 BULK TRUCK DRIVER _____

HANDLING	<u>289</u>	@	<u>1.25</u>	<u>361.25</u>
MILEAGE	<u>30 x 289 x .05</u>			<u>433.50</u>

TOTAL 4995.05

REMARKS:

SERVICE

Run casing + break circulation
circulate for 35 minutes. Pump
500 Gal Mud-clean plug put + unuse 12'
25 sx cement switch to casing + pump
200 sx ASC cement wash pump + lines
+ Release plug. Displace with 72 1/2 Obts
27 KCL Pump plug + float held

DEPTH OF JOB	<u>4500'</u>			
PUMP TRUCK CHARGE				<u>1264.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>30</u>	@	<u>4.00</u>	<u>120.00</u>

TOTAL 1384.00

CHARGE TO: Pioneer Exploration
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

	<u>1 Reg Guide shoe</u>	@	<u>125.00</u>	<u>125.00</u>
	<u>1-APU float collar</u>	@	<u>245.00</u>	<u>245.00</u>
	<u>7-centralizers</u>	@	<u>45.00</u>	<u>315.00</u>
	<u>1-Rubber plug</u>	@	<u>48.00</u>	<u>48.00</u>

TOTAL 733.00

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 4995.05
 DISCOUNT 4995.05 IF PAID IN 30 DAYS

SIGNATURE Dean Howard

PRINTED NAME Dean Howard

ANY APPLICABLE TAX
 WILL BE CHARGED
 UPON INVOICING

RECEIVED
 KANSAS CORPORATION COMMISSION
 OCT 05 2004
 CONSERVATION DIVISION
 WICHITA, KS