

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5663
Name: Hess Oil Company
Address: P. O. Box 1009
City/State/Zip: McPherson, KS 67460
Purchaser: _____
Operator Contact Person: Bryan Hess
Phone: (620) 241-4640
Contractor: Name: Cheyenne Well Service, Inc.
License: 6454
Wellsite Geologist: James C. Hess

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: L. D. Drilling
Well Name: Nelson "BB" #1
Original Comp. Date: 2/12/86 Original Total Depth: 4320'
____ Deepening ____ Re-perf. Conv. to Enhr./SWD
 Plug Back 1522' Plug Back Total Depth
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. D-28,850

<u>12-4-2006</u>	<u>12-5-2006</u>	<u>12-7-2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 195-21,847-00-01
County: Trego
330' 4978 feet from (S) (circle one) Line of Section
1950 3242 feet from (E) (circle one) Line of Section
KCC 6 PS
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (SW) SW
Lease Name: Juliette Well #: 2 OWWO

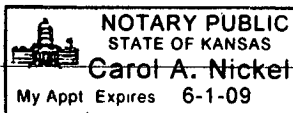
Field Name: _____
Producing Formation: _____
Elevation: Ground: 2302' Kelly Bushing: 2308'
Total Depth: 1522' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 302 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1763 Feet
If Alternate II completion, cement circulated from 1763
feet depth to surface w/ 220 sx cmt.

Drilling Fluid Management Plan *W.H.H.*
(Data must be collected from the Reserve Pit) *7-12-07*
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: Bryan Hess
Title: Bryan Hess, President Date: 1-4-07
Subscribed and sworn to before me this 14th day of January,
20 07
Notary Public: Carol A. Nickel
Date Commission Expires: _____



KCC Office Use ONLY

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

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 05 2007

Operator Name: Hess Oil Company Lease Name: Juliette Well #: 2 OWWO
 Sec. 10 Twp. 14 S. R. 22 East West County: Trego

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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"	23#	302'	60/40 Pozmix	225	
production	7-7/8"	4-1/2"	10.5#	4319'	50/50 Pozmix	125	

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	1522' -4319'	Pozmix	150	

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)		
2	1400' - 1420'				

TUBING RECORD	Size 2-3/8"	Set At 1370'	Packer At 1370'	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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)
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Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio	Gravity
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Disposition of Gas <input checked="" type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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