

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1997
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 31302
Name: Jones & Buck Development
Address: P.O.Box 68
City/State/Zip: Sedan, KS 67361
Purchaser: Cooperative Refining, LLC
Operator Contact Person: P.J. Buck
Phone: (316) 725-3636
Contractor: Name: MOKAT Drilling
License: 5831
Wellsite Geologist: Thomas H. Oast

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. _____
06-09-00 06-12-00 06-27-00
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 019-26,519-0000
County: Chautauqua
NW NW NW Sec. 36 Twp. 34 S. R. 10 East West
4975 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: Jordan Well #: 11
Field Name: Elgin
Producing Formation: Layton Sand

Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 1014 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 1007
feet depth to Surface w/ 150 sx cmt.

Drilling Fluid Management Plan ALT#2 KGR 7/05/07
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Disposal 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.: _____

AUG 16 2000

CONSERVATION DIVISION
Wichita, Kansas

RECEIVED
CORPORATION COMMISSION

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: [Signature]
Title: Partner Date: 8-11-00
Subscribed and sworn to before me this 11th day of August
2000
Notary Public: [Signature]
Date Commission Expires: _____

NOTARY PUBLIC, State of Kansas
REDA TALBOTT
My Comm. Exp. 2/5/01

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

Operator Name: Jones & Buck Development Lease Name: Jordan Well #: 11
 Sec. 36 Twp. 34 S. R. 10 East West County: Chautauque

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 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:
 Gamma/Ray/Neutron

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Upper Layton Sand	663	
Iola Lime	935	
Lower Layton Sand	941	

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	# Sacs Used	Type and Percent Additives
Surface	10 3/4	8 5/8		40'	Portland		
Production	6 3/4	4 1/2	9.5	1007'	40/60poz	115000	

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
7	943-949	1. 300 gals 15% Acid with 300 gals water	943-49
		2. 1200 lbs. 12/20 sand frac. with 80 bbls water	
		3. 2500 lbs. 12/20 sand frac. with 90 bbls water	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	940		

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
06-30-00	<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
	2	trace	10		

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

ACKARTMAN HARDWARE and LUMBER CO
 168 EAST MAIN STREET
 SEDAN, KS 67361

ORIGINAL PAGE NO: 1

PHONE: (316) 725-3183

THANKS FOR YOUR BUSINESS!!

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
253636				NET 10TH	JQ	6/28/00	2:44

S
O
L
D

T
O

JONES & DUCK DEVELOPMENT
 P. O. BOX 68

 SEDAN KS 67361

S
H
I
P

T
O

DOCH 26986

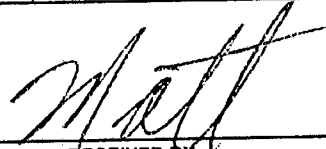
 * INVOICE *

TAX : 001 KANSAS SALES TAX

SHIPPED	ORDERED	UM	SKU	DESCRIPTION	SLUGG	UNITS	PRICE/PER	EXTENSION
11		EA	RM44816	PORTLAND CEMENT 94# JORDAN LEASE*****		11	7.05 /EA	77.55

** AMOUNT CHARGED TO STORE ACCOUNT ** 82.51 TAXABLE 77.55
 NON-TAXABLE 0.00
 SUBTOTAL 77.55

 TAX AMOUNT 4.96
 TOTAL AMOUNT 82.51

X 
 RECEIVED BY

ORIGINAL



CONSOLIDATED INDUSTRIAL SERVICES

.....
AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 316/431-9210 • 1-800/467-8676

INVOICE DATE	INVOICE NO.
06/15/00	00167924

SOLD TO
4291
J. B. D. & P. J. BUCK
P.O. BOX 68
SEDAN KS 67361

REMIT TO: CONSOLIDATED IND. SERVICES
P.O. BOX 26147
SHAWNEE MISSION, KS 66225

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

ACCOUNT NO.	P.O. NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
4291	0159	40	JORDAN # 11	06/12/2000	15380		
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5401			CEMENT PUMPER	1.0000	475.0000	EA	475.00
5402			CASING FOOTAGE	1007.0000	1.0000	EA	1007.00
1118			PREMIUM GEL	4.0000	10.5000	SK	42.00
1110			GILSONITE (50#)	15.0000	17.5000	SK	262.50
1111			GRANULATED SALT (80#)	300.0000	2.0000	LB	600.00
1107			FLO-SEAL (25#)	1.5000	33.5500	SK	50.33
1105			COTTONSEED HULLS	1.0000	11.5000	SK	11.50
4404			4 1/2" RUBBER PLUG	1.0000	26.0000	EA	26.00
4151			FUEL SURCHARGE	138.0000	1.0000	EA	138.00
5502			80 BBL VACUUM TRUCK	2.0000	60.0000	HR	120.00
5131			40/60 POZ MIX	150.0000	8.0000	SK	1200.00
5407			BULK CEMENT DELIVERY/MIN BULK DEL	1.0000	150.0000	EA	150.00

ROSS INVOICE	TAX
2511.83	90.88

ORIGINAL INVOICE

PLEASE PAY
2602.71



CONSOLIDATED INDUSTRIAL SERVICES
 AN INFINITY COMPANY
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 OR 800-467-8676

ORIGINAL
 TICKET NUMBER **15380**
 LOCATION Bartlesville

FIELD TICKET

DATE 6-12-00	CUSTOMER ACCT # 4291	WELL NAME Jordan #11	QTR/QTR	SECTION	TWP	RGE	COUNTY Chautauque	FORMATION
CHARGE TO JBD % P.J. Buck				OWNER				
MAILING ADDRESS P.O. Box 68				OPERATOR				
CITY & STATE Sedan, KS 67361				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE	LS	425.00
5402	1007	HYDRAULIC HORSE POWER		100.20
1118	4 sks	Premium Gel		42.00
1110	15 sks	Gilsonite		262.50
1111	6 sks	Granulated Salt		60.00
1107	1 1/2 sks	Fla Seal		50.33
1105	1 sk	Cottonseed Hulls		11.50
4404	1	4 1/2 Rubber Plug		26.00
4151	3 trucks	Fuel Surcharge		13.80
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
5502	2 hrs	VACUUM TRUCKS		120.00
		FRAC SAND		
1131	150 sks	CEMENT		1200.00
			Tax	90.80
5407	min	NITROGEN		150.00
		TON-MILES		

NSCO #15097

ESTIMATED TOTAL **2602.20**

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Tracy L. Williams

CUSTOMER or AGENT (PLEASE PRINT)

DATE

1679.24

ORIGINAL

CONSOLIDATED INDUSTRIAL SERVICES, INC.
211 W. 14TH STREET, CHANUTE, KS 66720
316-431-9210 OR 800-467-8676

TICKET NUMBER 12940

LOCATION Bartlesville

TREATMENT REPORT

FOREMAN Tracy L. Williams

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
6-18-00	4291	Jordan #11					Chautauque	
CHARGE TO J.B.D & P.J. Buck				OWNER				
MAILING ADDRESS P.O. Box 68				OPERATOR				
CITY Sedan				CONTRACTOR				
STATE KS ZIP CODE 67361				DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA

HOLE SIZE	6 3/4
TOTAL DEPTH	1010
CASING SIZE	4 1/2
CASING DEPTH	1007
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC FLOW
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Ran 2 sks of gel then broke circulation. Ran 150 sks of 4/60 permix 5# Gilsomite 5% salt, 2% gel + 4 # F/G with 1 sk of Hulls. Shut down & washed up behind plug & pumped plug to bottom. Set float shoe & shut in.

PRESSURE SUMMARY

BREAKDOWN or CIRCULATING	psi	0
FINAL DISPLACEMENT	psi	600
ANNULUS	psi	
MAXIMUM	psi	1000
MINIMUM	psi	
AVERAGE	psi	
ISIP	psi	0
5 MIN SIP	psi	
15 MIN SIP	psi	

TREATMENT RATE

BREAKDOWN BPM	4
INITIAL BPM	4
FINAL BPM	4
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	
HYD HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED

TITLE

DATE

ALL THE TERMS AND CONDITIONS STATED ON THE REVERSE SIDE ARE INCORPORATED AS PART OF THIS SALE.