

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API No. 15- 065-22835-0000

County Graham

Sec. 16 Twp. 8 Rge. 23 X ^E

230 Feet from (S)N (circle one) Line of Section

1720 Feet from (E)W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

Lease Name Roger Well # 1

Field Name Higer NE

Producing Formation Lansing

Elevation: Ground 2164 KB 2169

Total Depth 3665 PBTD

Amount of Surface Pipe Set and Cemented at 233 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan PTA EN B 07.02
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite:

No fluids were removed & allowed to air dry

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

Operator: License # 32016

Name: Pioneer Resources

Address 177W. Limestone Rd.

City/State/Zip Phillipsburg, KS 67661

Purchaser: _____

Operator Contact Person: Rodger D Wells

Phone (785) 543-5556

Contractor: Name: Shields Drilling

License: 5184

Wellsite Geologist: Todd Morgenstern

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:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

5-17-02 5-24-02 5-24-02
Spud Date Date Reached TD Completion 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 on 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 Rodger D Wells

Title Owner Date 8-22-02

Subscribed and sworn to before me this 23rd day of August 19-2002

Notary Public [Signature]

Date Commission Expires _____

NOTARY PUBLIC
GAVI A MCCREERY
State of Kansas
My Appt. Exp. 3-8-2004

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

JAN 1980

SIDE TWO

Operator Name Pioneer ResourcesLease Name RogerWell # 1Sec. 16 Twp. 8 Rge. 23 East
 WestCounty Graham

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

(1) On Geological 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 Guard Log

| Name | Formation (Top), Depth and Datum | | Datum |
|-----------|----------------------------------|-------|-------|
| | Top | Depth | |
| Anh. | 1826 | | + 343 |
| Base Anh. | 1859 | | + 310 |
| Topeka | 3186 | | -1017 |
| Heeb. | 3392 | | -1223 |
| Tor. | 3417 | | -1246 |
| Lans. | 3451 | | -1263 |
| Base KC. | 3634 | | -1472 |
| LTD. | 3664 | | -1495 |
| RTD. | 3665 | | -1496 |

CASING RECORD

 New 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 1/2 inch | 8 5/8 | 7875 | 233 | 60/40 Poz Mix | 165 | 2% Ge 13% cc |

ADDITIONAL CEMENTING/SQUEEZE RECORD

| Purpose: | Depth | | Type of Cement | #Sacks Used | Type and Percent Additives |
|---|-------|--------|----------------|-------------|----------------------------|
| | Top | Bottom | | | |
| <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 | | |
|--|---|---------|---|---------------|--|
| | Specify Footage of Each Interval Perforated | | (Amount and Kind of Material Used) Depth | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| TUBING RECORD | | Size | Set At | Packer At | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date of First, Resumed Production, SMD or Inj. | | | 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:

METHOD OF COMPLETION

Vented Sold Used on Lease
 (If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

Production Interval

ALLIED CEMENTING CO., INC. 7100

Federal Tax I.D.# XXXXXXXXXX

ORIGINAL

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

SERVICE POINT:
Oakley

| | | | | | | | |
|-------------------------|---------------|-----------------|-------------------------------------|------------|----------------------------|---------------------------|---------------------------|
| DATE <u>5-24-02</u> | SEC <u>16</u> | TWP <u>8S</u> | RANGE <u>23W</u> | CALLED OUT | ON LOCATION <u>Midnite</u> | JOB START <u>12:30 AM</u> | JOB FINISH <u>2:45 AM</u> |
| LEASE <u>Roger</u> | | WELL # <u>1</u> | LOCATION <u>Hill City 2W-15-14W</u> | | COUNTY <u>Graham</u> | STATE <u>Kan</u> | |
| OLD OR NEW (Circle one) | | | | | | | |

CONTRACTOR Shields Dets Co

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D. 3665'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 x H DEPTH 1860'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT AMOUNT ORDERED 200 SKS 60/40 per 6% Gel, 1/4" Flo-Seal

| | | | |
|---------------------|-----------------------|---|--------------|
| COMMON | <u>120 SKS</u> | @ | <u>6.65</u> |
| POZMIX | <u>80 SKS</u> | @ | <u>3.55</u> |
| GEL | <u>10 SKS</u> | @ | <u>10.00</u> |
| CHLORIDE | | @ | |
| <u>Flo-Seal 50#</u> | | @ | <u>1.40</u> |
| | | @ | |
| | | @ | |
| | | @ | |
| | | @ | |
| | | @ | |
| HANDLING | <u>212 SKS</u> | @ | <u>1.10</u> |
| MILEAGE | <u>4¢ per SK/mile</u> | | |
| TOTAL _____ | | | |

EQUIPMENT

| | |
|-------------------------|----------------------|
| PUMP TRUCK # <u>300</u> | CEMENTER <u>Walt</u> |
| BULK TRUCK # <u>315</u> | HELPER <u>Wayne</u> |
| BULK TRUCK # _____ | DRIVER <u>Terry</u> |
| BULK TRUCK # _____ | DRIVER _____ |

REMARKS:

| |
|------------------------|
| <u>25 SKS @ 1860'</u> |
| <u>100 SKS @ 1025'</u> |
| <u>40 SKS @ 285'</u> |
| <u>10 SKS @ 40'</u> |
| <u>10 SKS in M.H.</u> |
| <u>15 SKS in R.H.</u> |

[Signature]

SERVICE

| | |
|-------------------|-------------------------|
| DEPTH OF JOB | <u>1860'</u> |
| PUMP TRUCK CHARGE | |
| EXTRA FOOTAGE | @ _____ |
| MILEAGE | <u>miles @ 3.00</u> |
| PLUG | <u>8 5/8 DH @ 23.00</u> |
| | @ _____ |
| | @ _____ |
| TOTAL _____ | |

RECEIVED

AUG 26 2002

KCC WICHITA

CHARGE TO: Pioneer Resources

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.

SIGNATURE Way Roberts

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME _____

ALLIED CEMENTING CO., INC

Federal Tax I.D.# [REDACTED]

10687
ORIGINAL

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

SERVICE POINT: _____

| | | | | | | | |
|-------------------------|--------|--|-------|------------|------------------------------|-----------------|-----------------------------|
| DATE <u>5/12/02</u> | SEC. | TWP. | RANGE | CALLED OUT | ON LOCATION <u>7:30 P.M.</u> | JOB START | JOB FINISH <u>9:15 P.M.</u> |
| LEASE <u>2000-01</u> | WELL # | LOCATION <u>1/2 mile S. of Hwy 400</u> | | | COUNTY <u>Cherokee</u> | STATE <u>K.</u> | |
| OLD OR NEW (Circle one) | | | | | | | |

CONTRACTOR W. C. [unclear]
 TYPE OF JOB Drill hole ✓
 HOLE SIZE _____ T.D. _____
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 14/4 [unclear]

OWNER _____
 CEMENT AMOUNT ORDERED 1125 [unclear] 379.46

 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____
 TOTAL _____

EQUIPMENT
 PUMP TRUCK CEMENTER _____
 # 137 HELPER _____
 BULK TRUCK _____
 # 213 DRIVER Burt
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS:

SERVICE

_____ ✓

DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG 2 [unclear] @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: Proctor Services
 STREET _____
 CITY _____ STATE _____ ZIP _____

RECEIVED
 AUG 26 2002
 KCC WICHITA
 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 Burton Beery

Burton Beery
 PRINTED NAME