

**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 # 31930
 Name: BlueRidge Petroleum Corporation
 Address: P.O. Box 385
 City/State/Zip: Ness City, KS 67560
 Purchaser: _____
 Operator Contact Person: Jonathan Allen
 Phone: (785) 398-2673
 Contractor: Name: Discovery Drilling Co., Inc.
 License: 31548
 Wellsite Geologist: Jim Musgrove

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. _____

<u>1/15/01</u>	<u>1/24/01</u>	<u>1/25/01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

CONSERVATION DIVISION
 FEB 22 2001
 RECEIVED
 STATE CORPORATION COMMISSION

API No. 15-135-24,124-0000
 County: Ness
C NW NE Sec. 36 Twp. 18 S. R. 25W East West
690 feet from S N (circle one) Line of Section
1970 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Horchem Well #: 1-36
 Field Name: _____
 Producing Formation: None
 Elevation: Ground: 2397 Kelly Bushing: 2405
 Total Depth: 4463 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 214.23 Feet
 Multiple Stage Cementing Collar Used? Yes No
 Yes, show depth set _____ Feet
 Alternate II completion, cement circulated from _____
 Feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan P+A KGR 7/20/07
 (Data must be collected from the Reserve Pit)
 Chloride content: 18,000 ppm Fluid volume: 320 bbls
 Dewatering method used: Evaporation
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 County: _____ Docket No.: _____

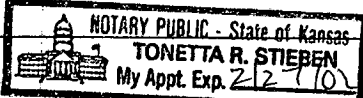
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: Jonathan Allen
 Title: Vice President Date: 2/21/2001
 Subscribed and sworn to before me this 21st day of February,
2001.
 Notary Public: Jouetta R. Stieben
 Date Commission Expires: 2/27/02

KCC Office Use ONLY

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


 NOTARY PUBLIC - State of Kansas
 TONETTA R. STIEBEN
 My Appt. Exp. 2/27/02

Operator Name: BlueRidge Petroleum Corporation Lease Name: Horchem Well #: 1-36
 Sec. 36 Twp. 18 S. R. 25W East West County: Ness

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 checked="" type="checkbox"/> Yes <input 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: <p style="text-align: center;">Radiation Guard Log</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>1671</td> <td>+ 734</td> </tr> <tr> <td>Heebner</td> <td>3779</td> <td>-1374</td> </tr> <tr> <td>Lansing</td> <td>3822</td> <td>-1417</td> </tr> <tr> <td>Ft. Scott</td> <td>4331</td> <td>-1926</td> </tr> <tr> <td>Cherokee</td> <td>4355</td> <td>-1950</td> </tr> <tr> <td>Mississippian</td> <td>4427</td> <td>-2022</td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	1671	+ 734	Heebner	3779	-1374	Lansing	3822	-1417	Ft. Scott	4331	-1926	Cherokee	4355	-1950	Mississippian	4427	-2022
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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 Pipe	12 1/4	8 5/8	25	214.23	60/40Poz	150	2%Gel&3%CC

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		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	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	

RECORDED & INDEXED

ORIGINAL

BlueRidge Petroleum Corporation
Horchem #1-36
C NW NE Sec. 36-T18S-R25W
Ness County, Kansas

DST #1

Toronto 3,774' - 3,824'
20-45-60-60
Recovered 120' watery mud & 420' slightly muddy water
ISIP 1233#, FSIP 1072#, IFP 58-97#, FFP 127-273#.

DST #2

Fort Scott 4,314' - 4,356'
15-45-60-60
Recovered 60' gas in pipe, 40' oil specked gassy mud.
ISIP 1109#, FSIP 1008#, IFP 57-63#, FFP 66-78#.

DST #3

Mississippian 4,442' - 4,453'
15-45-30-60
Recovered 1' clean oil, 5' oil cut mud
ISIP 1107#, FSIP 958#, IFP 40-39#, FFP 39-40#.



SWIFT
Services, Inc.

CHARGE TO: Blue Ridge Petroleum
ADDRESS:
CITY, STATE, ZIP CODE: Ness City, KS

TICKET No. 3222

PAGE 1 OF 1

SERVICE LOCATIONS:
1. Ness City, KS WELL/PROJECT NO. 1-36 LEASE Horchem COUNTY/PARISH Ness STATE Ks CITY Ness City, KS DATE 1-25-01 OWNER Same
2. TICKET TYPE SERVICE SALES CONTRACTOR Discovery Oil & Gas Co. RIG NAME/NO. DELIVERED TO W of Ness City, KS ORDER NO.
3. WELL TYPE Oil WELL CATEGORY Development JOB PURPOSE New well WELL PERMIT NO. WELL LOCATION
4. INVOICE INSTRUCTIONS Plug to Abandon

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING		DESCRIPTION	QTY.	U/M	QTY.	U/M	DIS- UN- DECIDED	AGREE	AGREI
		LOC	ACCT								
575		1		MILEAGE	10	mi					
576		1		Pump Charge	1	ea					
410		1		Top Plug	1	ea					
328		1		60/40 permix w/ 67ogel	245	sls					
276		1		Flocele	62	lbs					
581		1		Service Charge Cement	245	sls					
582		1		Drayage minimum							100 mls

REMIT PAYMENT TO:
SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X William J. [Signature] TIME SIGNED 1:00 P.M. A.M.

DATE SIGNED 1-25-01

INVOICE INSTRUCTIONS: CUSTOMER DID NOT WISH TO RESPOND

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR: [Signature] APPROVAL

ORIGINAL

