

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 # 9911
Name: HAR-KEN Agent OK
Address: 12028 N Pennsylvania
City/State/Zip: Oklahoma City, OK 73120
Purchaser: CRA
Operator Contact Person: Stuart Kirk
Phone: (405) 752-0318
Contractor: Name: L. D. Drilling
License: 6039
Wellsite Geologist: Kim Schoemaker

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____

8-5-00 8-13-00 9-29-00
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 135 24108 -0000
County: Ness
NW NE NW Sec. 23 Twp. 20 S. R. 24 East West
330' feet from S / N (circle one) Line of Section
3630' feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Petersilie Well #: 1
Field Name: Petersilie
Producing Formation: Mississippi
Elevation: Ground: 2304 Kelly Bushing: 2309
Total Depth: 4399 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 735.15 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 4399 Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Alt. 2 KJR 7/19/07
(Data must be collected from the Reserve Pit)
Chloride content 6500 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: Stuart Kirk
Title: Agent Date: Feb 5, 2001
Subscribed and sworn to before me this 5 day of Feb
2001
Notary Public: Paul D. Willis
Date Commission Expires: February 20, 2002

KCC Office Use ONLY

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

Operator Name: HAR-KEN Agent OK Lease Name: Petersilie Well #: 1
 Sec. 23 Twp. 20 S. R. 24 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 (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: Dual Induction Comp Neut Den	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table border="1" 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>Anhy</td><td>1520</td><td>+784</td></tr> <tr><td>Heebner</td><td>3696</td><td>-1387</td></tr> <tr><td>Lansing</td><td>3745</td><td>-1436</td></tr> <tr><td>B/KC</td><td>4110</td><td>-1801</td></tr> <tr><td>Marm</td><td>4122</td><td>-1813</td></tr> <tr><td>Ft Scott</td><td>4267</td><td>-1958</td></tr> <tr><td>Cherokee</td><td>4292</td><td>-1983</td></tr> <tr><td>Miss</td><td>4368</td><td>-2059</td></tr> </tbody> </table>	Name	Top	Datum	Anhy	1520	+784	Heebner	3696	-1387	Lansing	3745	-1436	B/KC	4110	-1801	Marm	4122	-1813	Ft Scott	4267	-1958	Cherokee	4292	-1983	Miss	4368	-2059
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CASING RECORD <input 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#	735.15	60/40 PozM	350	3%Cal 2%gel
Production	7 7/8	5 1/2	14# J55	4384.	ASC	125	10%salt, 5#/sx

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
	Completed O/H TD 4399	Csg@ 4399	

TUBING RECORD		Size <u>2 7/8</u>	Set At <u>4361</u>	Packer At	Liner Run <input type="checkbox"/> Yes
Date of First, Resumed Production, SWD or Enhr. <u>8/26/00</u>		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. <u>13</u>	Gas Mcf <u>0</u>	Water Bbls. <u>20</u>	Gas-Oil Ratio <u>38@60deg. F</u>	Gravity

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify) _____

RECEIVED
 STATE CORPORATION COMMISSION
 FEB 12 2001

CONSERVATION DIVISION
 No. Kansas

ALLIED CEMENTING CO., INC. 4021 ORIGINAL

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

SERVICE POINT: New City
 8-12-00

DATE <u>8-13-00</u>	SEC <u>23</u>	TWP <u>20</u>	RANGE <u>24</u>	CALLED OUT <u>9:00 PM</u>	ON LOCATION <u>11:00 PM</u>	JOB START <u>11:45 PM</u>	JOB FINISH <u>11:45 AM</u>
LEASE <u>Permit</u>			WELL # <u>1</u>	LOCATION <u>New City - 95, 2^{1/2} W, 5/3</u>		COUNTY <u>New</u>	STATE <u>Ks</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR <u>L.D. Dalg</u>	OWNER <u>Same</u>
TYPE OF JOB <u>Production</u>	
HOLE SIZE <u>7 7/8"</u>	I.D. <u>4399'</u>
CASING SIZE <u>5 1/2" (14#)</u>	DEPTH <u>4384'</u>
TUBING SIZE _____	DEPTH _____
DRILL PIPE _____	DEPTH _____
TOOL <u>Pass Callor size</u>	DEPTH <u>1565'</u>
PRES. MAX <u>1500#</u>	MINIMUM _____
MEAS. LINE _____	SHOE JOINT <u>21'</u>
CEMENT LEFT IN CSG. <u>21'</u>	
PERFS. _____	
DISPLACEMENT <u>109.84 bbls</u>	<u>(.37% over)</u>
EQUIPMENT	
PUMP TRUCK CEMENTER <u>T. Larson</u>	
# <u>224</u>	HELPER <u>Stewart</u>
BULK TRUCK _____	
# <u>260</u>	DRIVER <u>Stewart</u>
BULK TRUCK _____	
# _____	DRIVER _____

CEMENT		
AMOUNT ORDERED <u>125 lbs ASC 5# Kol Seal</u>		
<u>Per Seal 1025 lbs</u>		
<u>500 gal ASF</u>		
COMMON _____	@ _____	
POZMIX _____	@ _____	
GEL _____	@ _____	
CHLORIDE _____	@ _____	
<u>ASC - 125</u>	@ <u>8.20</u>	<u>1025.00</u>
<u>Kol Seal - 1025#</u>	@ <u>38</u>	<u>237.50</u>
<u>ASF - 500</u>	@ <u>1.00</u>	<u>500.00</u>
_____	@ _____	
_____	@ _____	
HANDLING <u>125</u>	@ <u>1.05</u>	<u>131.25</u>
MILEAGE <u>14</u>	<u>Min</u>	<u>100.00</u>
		TOTAL \$ <u>1993.75</u>

REMARKS:
Run 4384' of 5 1/2" cas. Break circulation
Pumped 500 gal ASF followed by
1025 lbs ASC 5# Kol Seal @ 10% salt
Washed line clean of cement. Released
plug. Displaced with fresh H₂O
landed total down plug at 1500#.
Released a hold.
Drugged bottom w/ 1/2" salt.

SERVICE		
DEPTH OF JOB <u>4384'</u>		
PUMP TRUCK CHARGE _____		<u>1080.00</u>
EXTRA FOOTAGE _____	@ _____	
MILEAGE <u>14</u>	@ <u>3.00</u>	<u>42.00</u>
PLUG _____	@ _____	
_____	@ _____	
_____	@ _____	
		TOTAL \$ <u>1122.00</u>

CHARGE TO: Hon. Ken Oil Co.
 STREET 17028 N. Pennsylvania
 CITY Okla City STATE Okla ZIP 73120

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.

TAX _____
 TOTAL CHARGE \$ 3115.75
 DISCOUNT \$ 311.57 IF PAID IN 30 DAYS

SIGNATURE X T.C. Larson

SIGNATURE X T.C. LARSON
 PRINTED NAME
Net \$2804.18