

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33190
Name: Noble Energy, Inc.
Address: 1625 Broadway, suite 2200
City/State/Zip: Denver, CO 80202
Purchaser: Kinder Morgan
Operator Contact Person: Jennifer Barnett
Phone: (303) 228-4235
Contractor: Name: Excell Services Inc., Wray, CO
License: 8273

Wellsite Geologist: none
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. _____

<u>5/25/2008</u>	<u>5/26/2008</u>	<u>6/19/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 023-20889-0000
County: Cheyenne
NE SW _____ Sec. 28 Twp. 3 S. R. 41 East West
1675 feet from (S) / N (circle one) Line of Section
1580 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Lampe Well #: 23-28
Field Name: Cherry Creek

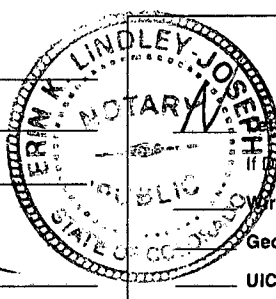
Producing Formation: Niobrara
Elevation: Ground: 3627' Kelly Bushing: 3636'
Total Depth: 1672' Plug Back Total Depth: 1610'
Amount of Surface Pipe Set and Cemented at 278', cmt w/95 sx Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH 1 NCR 8-6-08
(Data must be collected from the Reserve Pit)
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: Jennifer Barnett
Title: Permit Representative Date: 7/21/08
Subscribed and sworn to before me this 21st day of July
20 08
Notary Public: Erin Lindley Joseph
Date Commission Expires: My Commission Expires Aug. 20, 2008



KCC Office Use ONLY
_____ of Confidentiality Received
If Denied, Yes Date: _____
_____ Wireline Log Received
_____ Geologist Report Received
_____ UIC Distribution
RECEIVED
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JUL 22 2008

Operator Name: Noble Energy, Inc. Lease Name: Lampe Well #: 23-28
 Sec. 28 Twp. 3 S. R. 41 East West County: Cheyenne

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Triple Combo (Array Induction/Comp. Nuetron/ Litho Density), CBL/GR/CCL	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Niobrara 1431'
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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	9 7/8"	7"	17 Lbs./Ft.	278'	50/50 POZ	95 sx	3% CaCl. .25% Flo-cele
Production	6 1/4"	4 1/2"	11.6 Lbs./Ft.	1652'	Lead, Type III	38 sx	12% gel, 2% CaCl, .25 Polyflake
					Tail, Type III	56 sx	2% Gel, 1% CFL-80

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 <i>(Amount and Kind of Material Used)</i>	Depth
3 spf	Perf Niobrara interval from 1431'-1470'	Niobrara frac'd with 500 gals 7.5% HCL acid, 12,000 gals of	
	(39', 3spf, 117 holes) .41" EHD, 120 degree phase	25% CO2 foamed gel pad; 31,971 gals 25% CO2 foamed	
		gel carrying 100,160 lbs 16/30 sand. ATP-608 psi; ATR-16.4 bpm.	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 6/30/2008	Producing Method <input checked="" 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 Bbls. 0	Gas Mcf 100	Water Bbls. 0	Gas-Oil Ratio 0	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

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

Production Interval _____

BISON OIL WELL CEMENTING, INC.



1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8143
 E-mail: bisonoil1@qwest.net

VOICE # 7664
 LOCATION Hwy 36
 FOREMAN Eric, Pat, Allison

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY	FORMATION
5-25-08	Lampe 23-28				Cheyenne	

CHARGE TO <u>McPherson Drilling</u>	OWNER
MAILING ADDRESS	OPERATOR
CITY	CONTRACTOR <u>McPherson</u>
STATE ZIP CODE	DISTANCE TO LOCATION <u>70 m</u>
TIME ARRIVED ON LOCATION <u>2:00</u>	TIME LEFT LOCATION

WELL DATA			PRESSURE LIMITATIONS	
HOLE SIZE	TUBING SIZE	PERFORATIONS	THEORETICAL	INSTRUCTED
<u>9 7/8</u>				
TOTAL DEPTH <u>272</u>	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG	
	TUBING WEIGHT	OPEN HOLE	STRING	
CASING SIZE <u>7'</u>	TUBING CONDITION		TUBING	
CASING DEPTH <u>269</u>		TREATMENT VIA	TYPE OF TREATMENT	
CASING WEIGHT <u>17 #</u>	PACKER DEPTH		<input checked="" type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM
CASING CONDITION <u>good</u>			<input type="checkbox"/> PRODUCTION CASING	INITIAL BPM
PRESSURE SUMMARY			<input type="checkbox"/> SOOZE CEMENT	FINAL BPM
BREAKDOWN or CIRCULATING psi	AVERAGE psi		<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM
FINAL DISPLACEMENT psi	ISIP psi		<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM
ANNULUS psi	5 MIN SIP psi		<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM
MAXIMUM psi	15 MIN SIP psi		<input type="checkbox"/> MISC PUMP	
MINIMUM psi			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8

INSTRUCTIONS PRIOR TO JOB M.T.R.P. Safety meeting, Est circ, map 95 sks cont yield 1.23
Density 15.2, Displace 10 BBLs H₂O, shut in well wash up to pit

JOB SUMMARY
 DESCRIPTION OF JOB EVENTS M.T.R.P (2:15) SAFETY MEETING (2:20) Est circ, map
95 sks cont (2:30) Displace 10 BBL H₂O (2:41) SHUT IN well
wash up to pit (2:46)

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 CONSERVATION DIVISION
 WICHITA, KS

50% excess
5 BBLs back to pit

[Signature]
 AUTHORIZATION TO PROCEED

Driller
 TITLE

5-25-08
 DATE

Customers hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.

BISON-OIL-WELL CEMENTS, INC.



1738 Wynkoop St., Ste. 102
 Denver, Colorado 80202
 Phone: 303-296-3010
 Fax: 303-298-8143
 E-mail: bisonoil1@qwest.net

INVOICE # 7640
 LOCATION ST. FRANCIS KS
 FOREMAN STANLEY R. STIMPSON
ALEN
GEORGE

TREATMENT REPORT

DATE	WELL NAME	SECTION	TWP	RGE	COUNTY	FORMATION
5-26-08	Lamp 23-28				CHEYENNE	

CHARGE TO	EXCEL	OWNER	
MAILING ADDRESS		OPERATOR	GREG
CITY		CONTRACTOR	EXCEL RIGIT
STATE ZIP CODE		DISTANCE TO LOCATION	
TIME ARRIVED ON LOCATION	6:45	TIME LEFT LOCATION	8:50

WELL DATA			PRESSURE LIMITATIONS		
HOLE SIZE	6 7/8	TUBING SIZE	PERFORATIONS	THEORETICAL	INSTRUCTED
TOTAL DEPTH	1672	TUBING DEPTH	SHOTS/FT	SURFACE PIPE ANNULUS LONG	
		TUBING WEIGHT	OPEN HOLE	STRING	
CASING SIZE	4 1/2	TUBING CONDITION		TUBING	
CASING DEPTH	1647	TREATMENT VIA	TYPE OF TREATMENT		TREATMENT RATE
CASING WEIGHT	11.6	PACKER DEPTH	<input type="checkbox"/> SURFACE PIPE	BREAKDOWN BPM	
CASING CONDITION	good	PBTD 1610	<input checked="" type="checkbox"/> PRODUCTION CASING	INITIAL BPM	
			<input type="checkbox"/> SQUEEZE CEMENT	FINAL BPM	
			<input type="checkbox"/> ACID BREAKDOWN	MINIMUM BPM	
			<input type="checkbox"/> ACID STIMULATION	MAXIMUM BPM	
			<input type="checkbox"/> ACID SPOTTING	AVERAGE BPM	
			<input type="checkbox"/> MISC PUMP		
			<input type="checkbox"/> OTHER	HYD HHP = RATE X PRESSURE X 40.8	

PRESSURE SUMMARY			
BREAKDOWN or CIRCULATING	psi	AVERAGE	psi
FINAL DISPLACEMENT	psi	ISIP	psi
ANNULUS	psi	5 MIN SIP	psi
MAXIMUM	psi	15 MIN SIP	psi
MINIMUM	psi		

INSTRUCTIONS PRIOR TO JOB MTRU SAFETY MEETING 2ST-CIRC MTRU BIRMUD FLUSH
m-p 38 sls 50/150 P02 12%BBB-1 2%BCIA-1 25%BFLL-1
m-p 56 sls 50/150 P02 2%BBB-1 1%BFLL-1 125%BFLL-1
Drop Plug Displace 25 BB/14720 5ST Plug 1400 @ 1500 PSI
CHECK FLOAT & SHOE washup to PIT Rig down

JOB SUMMARY
 DESCRIPTION OF JOB EVENTS MTRU SAFETY 7:39 mud flush 7:42
Lead cement 7:51 Tail cement 7:55
Drop Plug 8:03 Displace 8:06
 Time Away PIT
 8:10 10 350
 8:15 20 500
 8:22 5ST Plug 1500

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 KANSAS CORPORATION COMMISSION
 JUL 22 2008
 CONSERVATION DIVISION
 WICHITA, KS

AUTHORIZATION TO PROCEED

TITLE _____ DATE 5-26-08

Customers hereby acknowledges and specifically agrees to the terms and conditions on this work order, including, without limitation, the provisions on the reverse side hereof which include the release and indemnity.