

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

Operator: License # 30604
Name: Raydon Exploration, Inc.
Address: 9400 N. Broadway, Ste. 400
City/State/Zip: Oklahoma City, OK 73114
Purchaser: _____
Operator Contact Person: David E. Rice
Phone: (620) 624-0156
Contractor: Name: Big A Drilling
License: 31572
Wellsite Geologist: ED GRIEVES
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. _____
10-31-04 11-09-04 4-19-05
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

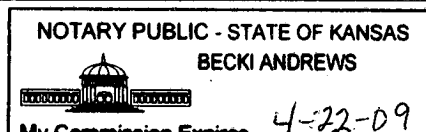
API No. 15 - 175-219490000
County: Seward
SE NW Sec. 23 Twp. 32 S. R. 32 East West
1980 feet from S (N) (circle one) Line of Section
1980 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: McBride Well #: 3-23
Field Name: Wildcat
Producing Formation: Lansing
Elevation: Ground: 2815' Kelly Bushing: 2826'
Total Depth: 4550' Plug Back Total Depth: 4497'
Amount of Surface Pipe Set and Cemented at 1664 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 A1+1 NCR 7-24-08
(Data must be collected from the Reserve Pit)
Chloride content 7000 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: David E Rice
Title: Agent for Raydon Date: 04-29-05
Subscribed and sworn to before me this 29 day of April,
~~2005~~ 2005
Notary Public: Becki Andrews
Date Commission Expires: _____



KCC Office Use ONLY

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

ORIGINAL

Operator Name: Raydon Exploration, Inc. Lease Name: McBride Well #: 3-23
 Sec. 23 Twp. 32 S. R. 32 East West County: Seward

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 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:

High Resolution Induction Log
 Spectral Density Dual Spaced Neutron Log
 Microlog

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Base Heebner	4247	
Toronto	4262	
Lansing	4348	

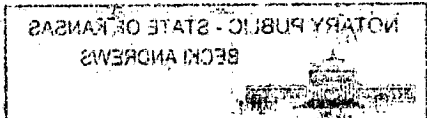
CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	24#	1664	Midcon C	405	3%cc, 1/2#/sk
					Premium Plu	150	2% cc, 1/4#/sk
Production	7-7/8"	5-1/2"	15.5#	4539	Scavenger	75	2% gel, 10#/sk

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
4	4378-4386' CIBP at 4370'	Acidized with 1000 gal 15% HCl NE FE acid	
4	4338-4344'	Acidized with 1000 gal 15% SBM FE acid	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2-7/8"	4351'	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method		
04-19-05			<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
	11.67	0	30.01	N/A	41.0

Disposition of Gas: Vented Sold Used on Lease (If vented, Sumit ACO-18.)
 METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled
 Production Interval: Other (Specify)



HALLIBURTON JOB SUMMARY

REGION Central Operations	AREA / COUNTRY Mid Continent/USA	SALES ORDER NUMBER 3366109	TICKET DATE 11/01/04
WELL ID / EMP # MCL / IO104	H.E.S. EMPLOYEE NAME JOHN WOODROW	BDA / STATE MC/Ks	COUNTY SEWARD
LOCATION LIBERAL	COMPANY RAYDON EXPLORATION	PSL DEPARTMENT Cement	CUSTOMER REP / PHONE 30 DAVID RICE
TICKET AMOUNT \$13,980.55	WELL TYPE 01 Oil	APIUM #	
WELL LOCATION LIBERAL, KS.	DEPARTMENT CEMENT	SAP BOMB NUMBER 7521	Cement Surface Casing
LEASE NAME MCRBIDE	Well No. SEC / TWP / RNG 3-23 28 - 32S - 32W	HES FACILITY (CLOSEST TO WELL SITE) LIBERAL, KS.	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS
Woodrow, J 105848	<input checked="" type="checkbox"/>	Berumen, E 467604	<input checked="" type="checkbox"/>
Oliphant, C 243055	<input checked="" type="checkbox"/>	Chapman,	<input checked="" type="checkbox"/>

H.E.S. UNIT #S / (R/T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10415641	60	10244148 / 10286731	30	
10589601	60	10010748 / 10011591	30	

Form. Name _____ Type: _____
Form. Thickness _____ From _____ To _____
Packer Type _____ Set At _____
Bottom Hole Temp. _____ Pressure _____
Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	11/1/2004	11/1/2004	11/1/2004	11/1/2004
Time	0000	0300	0702	0800

Type and Size	Qty	Make	Well Data
Float Collar INSERT 8 5/8	1	H	Casing <input type="checkbox"/> New/Used <input type="checkbox"/> Weight 24# Size 8 5/8 From KB To 1,664 Max. Allow
Float Shoe			Liner
Centralizers REG 8 5/8	4	A	Liner
Top Plug HWE 8 5/8	1		Tubing
HEAD Q.L 8 5/8	1	L	Drill Pipe
Limit clamp	1		Open Hole 12 1/4 Shots/Ft.
Weld-A		C	Perforations
Guide Shoe REG 8 5/8	1		Perforations
BTM PLUG		O	Perforations

Materials	Hours On Location	Operating Hours	Description of Job
Mud Type _____ Density _____ Lb/Gal _____ Disp. Fluid _____ Density _____ Lb/Gal _____ Prop. Type _____ Size _____ Lb _____ Prop. Type _____ Size _____ Lb _____ Acid Type _____ Gal. _____ % _____ Acid Type _____ Gal. _____ % _____ Surfactant _____ Gal. _____ In _____ NE Agent _____ Gal. _____ In _____ Fluid Loss _____ Gal/Lb _____ In _____ Gelling Agent _____ Gal/Lb _____ In _____ Fric. Red. _____ Gal/Lb _____ In _____ Breaker _____ Gal/Lb _____ In _____ Blocking Agent _____ Gal/Lb _____ Perfpac Balls _____ Qty. _____ Other _____ Other _____ Other _____ Other _____ Other _____	Date 11/1 Hours _____ RECEIVED MAY - 2 - 2005 KCC WICHITA	Date 11/1 Hours _____	Cement Surface Casing SEE JOB LOG

Ordered _____	Hydraulic Horsepower Avail. _____	Used _____
Treating _____	Average Rates in BPM Disp. _____	Overall _____
Feet 44	Cement Left in Pipe _____	Reason SHOE JOINT

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	405	MIDCON C		3% CC - 1/2# FLOCELE	17.92	2.92	11.40
2	150	PREM PLUS		2% CC - 1/4# FLOCELE	6.30	1.34	14.80
3							
4							

Summary			
Circulating Breakdown _____	Displacement _____	Preflush: BBI	Type: _____
Lost Returns _____	MAXIMUM _____	Load & Bkdn: Gal - BBI	Pad: Bbl - Gal
Cmt Rtrn#Bbl 50	Actual TOC _____	Excess /Return BBI	Calc. Disp Bbl 103
Average Shut In: Instant _____	Frac. Gradient _____	Calc. TOC: _____	Actual Disp. 103
	5 Min. 15 Min	Treatment Gal - BBI	Disp: Bbl 103.00
		Cement Slurry BBI	
		Total Volume BBI	245.0
			348.00

Frac Ring #1 _____ | Frac Ring #2 _____ | Frac Ring #3 _____ | Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
CUSTOMER REPRESENTATIVE _____
Signature: *Pat Lee* SIGNATURE

ALLIBURTON JOB SUMMARY

SALES ORDER NUMBER 3389857		TICKET DATE 11/10/04	
LOCATION Central Operations		NWA / COUNTRY Mid Continent/USA	
MBU ID / EMPL # MCLI0101 301261		H.E.S. EMPLOYEE NAME Scott Green	
LOCATION LIBERAL		COMPANY RAYDON EXPLORATION	
TICKET AMOUNT \$10,350.77		WELL TYPE 01 Oil	
WELL LOCATION Plains, Ks		DEPARTMENT Cement	
LEASE NAME MCBRIDE		SEC / TWP / RNG 23 - 32S - 32W	
Well No. 3-23		SAP BOMB NUMBER 7521	
		HES FACILITY (CLOSEST TO WELL SITE) Liberal Ks	
		CUSTOMER REP / PHONE WALT PRATHER 580-254-1274	
		PSL DEPARTMENT Cement	
		BDA / STATE MC/Ks	
		COUNTY SEWARD	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Green, S 301261	10.0			
Smith, B 106036	10.0			
Ferguson, R 106154	8.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547695	60			
10251401	60			
10240236 / 10240245	30			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth **4,540'**

Date	Called Out	On Location	Job Started	Job Completed
	11/10/2004	11/10/2004	11/10/2004	11/10/2004
Time	0000	0200	0900	1030

Tools and Accessories

Type and Size	Qty	Make
IFV 5 1/2"	1	Howco
Float Shoe		Howco
Centralizers 5 1/2" x 7 7/8"	8	Howco
Top Plug HWE 5 1/2"	1	Howco
HEAD 5 1/2"	1	Howco
Limit clamp 5 1/2"	1	Howco
Weld-A		Howco
Guide Shoe 5 1/2"	1	Howco
BTM PLUG		Howco

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	New	15.5#	5 1/2"		0	4,553	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8		1,664	4,540	Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

	Density	Lb/Gal
Mud Type		
Disp. Fluid		
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Hours On Location

Date	Hours
11/10	10.0
Total	10.0

Operating Hours

Date	Hours
11/10	3.0
Total	3.0

Description of Job

Cement Surface Casing

RECEIVED
MAY - 2 2005
KCC WICHITA

Hydraulic Horsepower

Ordered _____ Avail. _____ Used _____

Average Rates in BPM

Treating _____ Disp. _____ Overall _____

Cement Left in Pipe

Feet **43.6** Reason _____ **SHOE JOINT**

Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	75	50/50 POZ H		2% TOTAL GEL - 10# GILSONITE - 6/10% HALAD-322	15.90	2.77	11.00
2	110	PREMIUM H		10% CALSEAL - 10% SALT - 5# GILSONITE - .6% HALAD-322 -	6.23	1.48	15.00
3	25	50/50 POZ H		2% TOTAL GEL - 10# GILSONITE - 6/10% HALAD-322	7.08	1.59	13.00

Summary

Circulating Breakdown	Displacement	Preflush: BBI	3+12+3	Type: KCH+PVS-5+KCI
Lost Returns	MAXIMUM	Load & Bkdn: Gal - BBI		Pad: Bbl - Gal
Cmt Rtrn#Bbl	Actual TOC	Excess /Return BBI		Calc. Disp Bbl 107.3
Average	Frac. Gradient	Calc. TOC:	2,105'	Actual Disp. 107
Shut In: Instant	5 Min. 15 Min.	Treatment Gal - BBI		Disp: Bbl
		Cement Slurry BBI		Scav. - 37 / Prim. - 29
		Total Volume BBI	191.00	

Frac Ring #1 _____ Frac Ring #2 _____ Frac Ring #3 _____ Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____

 SIGNATURE