

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE
Form ACO-1 September 1999 Form Must Be Typed**

ORIGINAL

Operator: License # 5150
 Name: COLT ENERGY, INC.
 Address: P. O. BOX 388
 City/State/Zip: IOLA, KS 66749
 Purchaser: PLAINS MARKETING, LP
 Operator Contact Person: DENNIS KERSHNER
 Phone: (316) 365-3111
 Contractor: Name: FINNEY DRILLING
 License: 5989
 Wellsite Geologist: _____
 Designate Type Of Completion:
 New Well ReEntry 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: _____

API No. 15-031-21,896-00-00
 County: COFFEY
SW-SE -NE- Sec. 2 Twp. 23 S. R. 16 X E W
2815 feet from S Line of Section
895 feet from E Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 Circle one SE
 Lease Name: HAZEN Well #: 111
 Field Name: LEROY
 Producing Formation: SQUIRREL
 Elevation: Ground: UNKNOWN Kelly Bushing: _____
 Total Depth: 1000 Plug Back Total Depth: 996.30
 Amount of Surface Pipe Set and Cemented at 43 Feet
 Multiple Staging Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II Completion, cement circulated from 1000
 feet depth to SURFACE w/ 146 sx cement.
ACT II WAM 7/19/06

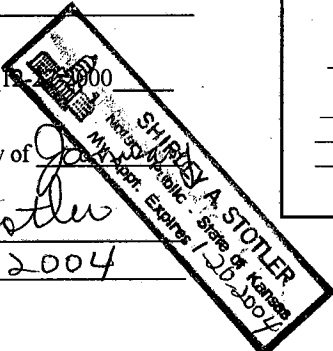
Original Comp. Date: _____ Original Total Depth: _____
~~Deepening~~ ~~Re-perf~~ ~~Conv. to Entr/SWD~~
 Plug Back Plug Back Total Depth: _____
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Entr.?) Docket No. _____
10-3-2000 10-9-2000
 Spud Date or Completion Date Date Reached TD Completion Date or Recompletion Date

Drilling Fluid Management Plan (Data Collected From Pit)
 Chloride Content 1000 ppm Fluid Volume 80 bbls
 Dewatering method used PUMPED OUT PUSH IN
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S R _____ E W
 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 this form (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of all wireline logs and geologist well reports shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 with all temporary 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: *Dennis Kershner*
 Title: OFFICE MANAGER Date: 12-2-2000
 Subscribed and sworn to before me this 24th day of Jan
2001
 Notary Public: *Shirley A Stotler*
 Date Commission Expires: 1-20-2004



KCC Office Use Only

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

✓

X

Operator Name COLT ENERGY, INC. Lease Name HAZEN Well # 111
 Sec. 2 Twp. 23 S. R. 16 XEast West County COFFEY

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.

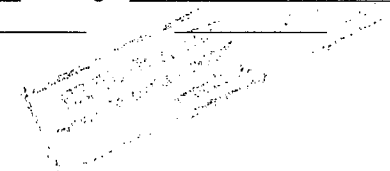
Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum SEE ATTACHED DRILLERS LOG
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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	10 3/4	7"	19	43	50/50 POZ	40	2% GEL 2% CC
PRODUCTION	5 5/8	2 7/8 10RD	6.5	996.3	50/50 POZ	146	2% GEL

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/F	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
2	DML RTG 963-971	GALS 15%HCL	
		12/20' SAND	

TUBING RECORD		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		
Estimated Production/24hrs	Oil Bbls	Gas Mcf	Water BBLs	Gas-Oil Ratio	Gravity
Disposition Of Gas			METHOD OF COMPLETION		
<input type="checkbox"/> Vented	<input type="checkbox"/> Sold	<input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole	<input checked="" type="checkbox"/> Perf.	<input type="checkbox"/> Dually Compl.
(If vented Submit ACO-18)			<input type="checkbox"/> Other (Specify) _____		



ORIGINAL

DRILLERS LOG

AFI NO. 15-031-218960000

S. 2 T. 23 R. 16E

OPERATOR: COLT ENERGY, INC

LOCATION: SE NE

ADDRESS: P.O. BOX 388 IOLA, KS 66749

COUNTY: COFFEY

WELL #: 11I

LEASE NAME: HAZEN

FOOTAGE LOCATION: 2815 FEET FROM SOUTH LINE 895 FEET FROM EAST LINE

CONTRACTOR: FINNEY DRILLING COMPANY

GEOLOGIST: GENE VINCENT

SPUD DATE: 10-3-00

TOTAL DEPTH: 1000

DATE COMPLETED: 10-9-00

OIL PURCHASER: PLAINS

CASING RECORD

PURPOSE OF STRING	SIZE OF HOLE	SIZE OF CASING	WEIGHT LBS/FT	SETTING DEPTH	TYPE CEMENT	SACKS	TYPE AND % ADDITIVES
SURFACE:	10.75	7"	17	43	TYPE A	55	SERVICE COMPANY
PRODUCTION:	5 5/8	2 7/8 10 RD	6.5	996.30	TYPE A	125	SERVICE COMPANY

WELL LOG

CORES: 960 TO 974

DST: NO

OPEN HOLE LOG: NO

RAN: 1 FLOATSHOE

3 CENTRALIZERS

6 SCRATCHERS

1 CLAMP

RECEIVED
KANSAS CORPORATION COMMISSION

MAY 16 2001

CONSERVATION DIVISION

<u>FORMATION</u>	<u>TOP</u>	<u>BOTTOM</u>	<u>FORMATION</u>	<u>TOP</u>	<u>BOTTOM</u>
TOP SOIL	0	3	SHALE	780	782
CLAY	3	20	LIMESTONE	782	784
RIVER GRAVEL	20	27	SHALE	784	841
SHALE	27	159	LIMESTONE	841	849
LIMESTONE	159	167	SHALE	849	867
SAND	167	175	LIMESTONE	867	869
LIMESTONE	175	189	SAND & SHALE	869	882
SHALE	189	196	SHALE	882	887
LIMESTONE	196	217	LIMESTONE	887	892
SHALE	217	233	SHALE	892	910
LIMESTONE	233	259	LIMESTONE	910	915
SHALE	259	309	SHALE	915	920
LIMESTONE	309	325	LIMESTONE	920	923
SHALE	325	338	SHALE	923	958
LIMESTONE	338	418	LIMESTONE	958	960
SHALE	418	450	SHALE	960	962
LIMESTONE	450	583	LIMESTONE	962	963
SHALE	583	716	SAND	963	967
SAND & LIME	716	744	SHALE	967	1000 T.D.
LIMESTONE	744	750			
SHALE	750	760			
LIMESTONE	760	762			
SHALE	762	771			
LIMESTONE	771	780			

CONSOLIDATED INDUSTRIAL SERVICES, INC.
211 W. 14TH STREET, CHANUTE, KS 66720
316-431-9210 OR 800-467-8676

ORIGINAL

TICKET NUMBER 11202

LOCATION Ottawa

FIELD TICKET

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
10-9-00	1828	Hazen 11-I		2	23	16	CF	
CHARGE TO <i>Colt Energy</i>				OWNER				
MAILING ADDRESS <i>P.O. Box 388</i>				OPERATOR <i>Gene</i>				
CITY & STATE <i>Topeka KS 66749</i>				CONTRACTOR <i>Finnay Drilling</i>				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE cement one well		525 ⁰⁰
5402	996	casing footage HYDRAULIC HORSE POWER	.13	129 ⁴⁸
1118	5	premium gel	11 ⁰⁰	55 ⁰⁰
4402	1	2 1/2 rubber plug		15 ⁷⁵
		TAX	6.49%	74 ⁶¹
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
		VACUUM TRUCKS <i>customer supplied</i>		
		FRAC SAND		
1124	146	CEMENT 50/50 pot	7 ⁵⁰	1095 ⁰⁰
		NITROGEN		
		TON-MILES		
5407	1-30-2004			175 ⁰⁰
			ESTIMATED TOTAL	2069 ⁸⁴

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN *Alan Mader*

CUSTOMER or AGENT (PLEASE PRINT)

DATE 10-9-00

169632