

Oil & Gas Conservation Division
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form Must Be Typed

ORIGINAL

Operator: License 32406
Name: Phoenix Kansas Energy, LLC.
Address: 536 North Highland
City/State/Zip: Chanute, Kansas 66720
Purchaser: Plains Marketing
Operator Contact Person: Bob Barnett
Phone: (316) 431 - 2650
Contractor: Name: Kelly Down Drilling
License: 5661
Wellsite Geologist: _____
Designate Type of Completion:

New Well Re-Entry Workover Temp. Abd.
 Oil SWD SIOW
 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 TD: _____
 Deepening _____
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

9/20/00 9/25/00 9/26/00
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 207 - 26704-0000
County NW SE NW SW SE NW NW SW SE NW NW SW
2680 3680 feet from S (N) (circle one) Line of Section
207 29100 feet from E (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Alexander Well # U-3
Field Name: Vernon
Producing Formation: Squirrel
Elevation: Ground 1055.5' Kelly Bushing: _____
Total Depth: 1060' Plug Back TD: 1023.4'
Amount of Surface Pipe Set and Cemented: 43.60'
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____
If Alternate II completion, cement circulated from 1050'
feet depth to Surface w/ 160 sx. cmt.
Drilling Fluid Management Plan NA 2 KJR 8/31/07
(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. _____

CONSERVATION DIVISION
Wichita, Kansas
NOV 30 2000

RECEIVED
KANSAS CORPORATION COMMISSION

INSTRUCTIONS: An original and two copies of this form shall be filled 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 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 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: Bob Barnett
Title: Operations Manager Date: 11-29-00

Subscribed and sworn to before me this 29th day of Nov., 2000

Notary Public: Karen M. Willey
Date Commission Expires: _____



KCC Office Use Only
 Letter of Confidentiality Attached
 If denied, Yes Date _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

X

Operator Name: **Phoenix Kansas Energy, LLC.** Lease Name: **Alexander** Well #: **U-3**

Sec. **2** Twp. **24** s R **16** East West

Instructions: Show important tops and base offormations penetrated. Detail all cores. Report all final copies of drill stems test giving interval tested, time tool open and closed, flowing and shut-in pressures, wheather shut-in pressure reached static level, hydrostatic pressure, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with the chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wiring 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <p style="text-align: center;">See Attached Logs</p>
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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 Used	# Sacks Used	Types and Percent Additives
Surface	10 5/8"	7"		43.60'	Portland	10	
Production	5 5/8"	2 7/8"		1050'	Portland	150	

Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Peforate				
<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
2	986'-998'	200 lbs. 20/40 mesh sand	
		3400 lbs. 12/20 mesh sand	
		150 lbs. salt	
		125 gals. 15% HCl	

TUBING RECORD	Size	Set At	Packer At	Liner Run
-				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
11/22/00	<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
	2	-	48		

Disposition of Gas	Method of Completion	Production Interval
<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 Comp. <input type="checkbox"/> Commingled	<input type="checkbox"/> Other (Specify) _____

Laymon Oil II, LLC

1998 Squirrel Rd
Neosho Falls, KS 66758
316-963-2495

ORIGINAL

September 26, 2000

RECEIVED SEP 26 2000

TOCO, LLC
PO Box 425
Chanute, KS. 66720

Alexander U-3
API # 15-207-26704
Spudding Date: 09/20/00
Completion Date: 09/26/00
Wo Co, KS Elev. 1055.5'
Sec. 02 Twp. 23S, Rng. 16E

Soil & Clay	0 - 10
Shale	10 - 146
Lime	146 - 202
Shale	202 - 226
Lime & Shale	226 - 565
Lime	565 - 623
Big Shale	623 - 756
Lime & Shale	756 - 963
Shale	963 - 980
Sand Upper	980 - 996
Shale	996 - 1011
1st Cap Rock	1011 - 1012
Shale	1012 - 1016
2nd Cap Rock	1016 - 1017
Sand Lower	1017 - 1020
Shale	1020 - 1060
Total Depth	1060

Set 43.60' of 7" surface pipe.
Cemented w/10 sks cement.
Core 1 980' - 998', recovered 18'.
Seating nipple @ 970'.
Ran 1050' of 2 7/8" 10 rd.

ORIGINAL

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

TICKET NUMBER 15754

LOCATION 1809th o Sound Pl

FOREMAN JF

1/2 E. on N. side

TREATMENT REPORT

DATE 10-24-00	CUSTOMER ACCT #	WELL NAME 91-3	QTR/QTR	SECTION 36	TWP 23	RGE 16E	COUNTY WO	FORMATION Sound
CHARGE TO 7000				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE				DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA

HOLE SIZE
TOTAL DEPTH
CASING SIZE
CASING DEPTH
CASING WEIGHT
CASING CONDITION
TUBING SIZE 2 1/2" 10wt
TUBING DEPTH
TUBING WEIGHT
TUBING CONDITION
PACKER DEPTH 996-998
PERFORATIONS 25 shots
SHOTS/FT
OPEN HOLE
TREATMENT VIA Tubing

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input checked="" type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input checked="" type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB 12.5 gal 15.9% HCl acid spot before treat. Break Well down, Stage acid 3 times, 17 stabilizer Mar Poto, Run Sand if PSI allows. Dip well 20/40, 17min 12/10, Dip up sand, 17min 12/10, Overflush 5.1.2.

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Break Well down, Staged acid 3 times, F. stabilized Mar BPM Run 20/40 Sand, 17min 12/10 Sand, Propped 300 of Rock Sell 150LBS, Run 17min more of 12/10 Sand, Cleaned up Blender, Overflushed 6 Bbls. Wait 10 Min For leak Down Test. Waited 5 Min, Shut T. a Well.

PRESSURE SUMMARY

BREAKDOWN or CIRCULATING	2700	psi
FINAL DISPLACEMENT		psi
ANNULUS		psi
MAXIMUM	3200	psi
MINIMUM	1500	psi
AVERAGE	2500	psi
ISIP	2450	psi
5 MIN SIP	400	psi
15 MIN SIP		psi

TREATMENT RATE

BREAKDOWN BPM	2
INITIAL BPM	17
FINAL BPM	16
MINIMUM BPM	11
MAXIMUM BPM	11
AVERAGE BPM	14

HYD HHP = RATE X PRESSURE X 40.8

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

ALL THE TERMS AND CONDITIONS STATED ON THE REVERSE SIDE ARE INCORPORATED AS PART OF THIS SALE.

ORIGINAL

CONSOLIDATED INDUSTRIAL SERVICES 3rd Floor AN INFINITY COMPANY 211 W. 14TH STREET, CHANUTE, KS 66720 316-431-9210 OR 800-467-8676

TICKET NUMBER 16932

LOCATION 13051 2 1/2 miles Rd. 2 1/2 S. of Vernon on N. side

FIELD TICKET

alexander A

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
10-25-00	6970	LA 3		16	23	161	W0	Southern
CHARGE TO 7000, LLC				OWNER				
MAILING ADDRESS 536 N. Highland PO Box 425				OPERATOR				
CITY & STATE Chanute, KS 66720				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102-3	1	PUMP CHARGE Free Pump		150.00
		HYDRAULIC HORSE POWER		
5302	1	Acid Spot.		250.00
3107	139 gal	1390 HCl acid		93.75
1108	1/4 Pint	Biosol LFB4		17.00
1227	300 150 LBS	Rock Salt 3M.A.		30.00
1231	110 gal 75 LBS	Free Gal		258.75
		STAND BY TIME		
		MILEAGE		
5301	2 hrs	WATER TRANSPORTS		130.00
		VACUUM TRUCKS		
2101	500	FRAC SAND 20/40		16.00
2102	3400	12/20		774.00
		CEMENT		
		NITROGEN		
5109	38 MI	TON-MILES		150.00
			ESTIMATED TOTAL	2769.00

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Frank Keilly

CUSTOMER or AGENT (PLEASE PRINT)

DATE 10-25-00

1169821

ORIGINAL

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

TICKET NUMBER **15754**
 LOCATION *1905th o Square Rd*
 FOREMAN *JK*
1 1/2 E. on N side

TREATMENT REPORT

DATE <i>10-26-00</i>	CUSTOMER ACCT #	WELL NAME <i>91-3</i>	QTR/QTR	SECTION <i>36</i>	TWP <i>23</i>	RGE <i>16E</i>	COUNTY <i>WO</i>	FORMATION <i>Square</i>
CHARGE TO <i>TOCO</i>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE				ZIP CODE				
TIME ARRIVED ON LOCATION				DISTANCE TO LOCATION <i>1/2</i>				
TIME LEFT LOCATION								

WELL DATA

HOLE SIZE
TOTAL DEPTH
CASING SIZE
CASING DEPTH
CASING WEIGHT
CASING CONDITION
TUBING SIZE <i>2 1/2 10sd</i>
TUBING DEPTH
TUBING WEIGHT
TUBING CONDITION
PACKER DEPTH
PERFORATIONS <i>996-999</i>
SHOTS/FT <i>25 shots</i>
OPEN HOLE
TREATMENT VIA <i>Inline</i>

TYPE OF TREATMENT

<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input checked="" type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input checked="" type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTIONS PRIOR TO JOB *12.5 gal 15.9% HCl acid Spot before frac, Break Well down, Stage acid 3 times, F stabilized Max Rate, Run Sand if PSI allows. Prop sell. Run 20/40, 17in 12/10 sand, 17in 12/20, Overflush 5 Bl.*

JOB SUMMARY

DESCRIPTION OF JOB EVENTS *Broke Well down, Staged acid 3 times, F stabilized Max BPM Run 20/40 Sand, 17in 12/10 sand, Propped 3rd of Rock Sell 150 LBS, Run 17in more of 12/20 Sand, Cleaned up Blender, Overflushed 6 Bls. Wait 10 Min For leak Down Test. Waited 5 Min, Shut In Well.*

PRESSURE SUMMARY

BREAKDOWN or CIRCULATING	<i>2700</i>	psi
FINAL DISPLACEMENT		psi
ANNULUS		psi
MAXIMUM	<i>3200</i>	psi
MINIMUM	<i>1500</i>	psi
AVERAGE	<i>2500</i>	psi
ISIP	<i>1450</i>	psi
5 MIN SIP	<i>1400</i>	psi
15 MIN SIP	<i>1400</i>	psi

TREATMENT RATE

BREAKDOWN BPM	<i>2</i>
INITIAL BPM	<i>17</i>
FINAL BPM	<i>16</i>
MINIMUM BPM	<i>11</i>
MAXIMUM BPM	<i>17</i>
AVERAGE BPM	<i>14</i>
HYD HHP = RATE X PRESSURE X 40.8	

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____

ALL THE TERMS AND CONDITIONS STATED ON THE REVERSE SIDE ARE INCORPORATED AS PART OF THIS SALE.

ORIGINAL

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TICKET NUMBER 16932

LOCATION 15051 2 3/4 mile Rd. 2 1/2 mi. S. of Vernon on N. Side

FIELD TICKET

alexander A

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
10-25-00	6970	CA 3		16	23	161	WIO	Sammil
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5102-3	1	PUMP CHARGE <i>Trice Pump</i>		1450. ⁰⁰
		HYDRAULIC HORSE POWER <i>proj. price</i>		
5302	1	Acid Spot.		250. ⁰⁰
3107	13 129 gal	13.70 HCl acid		93. ⁷⁵
1208	1/4 Pint	Bunker LFR4		17. ⁰⁰
1227	3.00 150 LBS	Rock Salt - Med.		30. ⁰⁰
1231	17.00 75 LBS	Trice Gal		258. ⁷⁵
		STAND BY TIME		
		MILEAGE		
5301	2 hrs	WATER TRANSPORTS		130. ⁰⁰
		VACUUM TRUCKS		
2101	2.00	FRAC SAND 20/40		16. ⁰⁰
2102	34.00	12/50		374. ⁰⁰
		CEMENT		
		NITROGEN		
5109	38 MI	TON-MILES		150. ⁰⁰
			ESTIMATED TOTAL	2769. ⁷⁵

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN *Frank Kelly*

CUSTOMER or AGENT (PLEASE PRINT)

DATE 10-25-00

1169821