

ORIGINAL

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 # 31070
Name: Eagle River Energy Corporation
Address: 7060 S. Yale
City/State/Zip: Tulsa, OK 74136
Purchaser: _____
Operator Contact Person: Mark Godsey
Phone: (918) 494-8928
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

Designate Type of Completion: (Original)
 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: Pan American

Well Name: Brown C #5

Original Comp. Date: 12/15/51 Original Total Depth: 3764

Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. D-11989
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____

| | | |
|-----------------------------------|-----------------|---|
| <u>8/3/65</u> | <u>4049</u> | |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 185-90417 19074-00-01

County: Stafford

NE SW NW Sec. 30 Twp. 21 S. R. 13 East West

3630 feet from (S) (circle one) Line of Section

4480 feet from (E) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE (NW) SW

Lease Name: O. Pundsack (Brown) Well #: 1

Field Name: Pundsack Per op. KCC NR 9-3-08

Producing Formation: Arbuckle

Elevation: Ground: 1919 Kelly Bushing: _____

Total Depth: 4038 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 207 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 WO-AH1 NCR 7-29-08
(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: Mark P. Godsey

Title: President Date: 5-25-05

Subscribed and sworn to before me this 25th day of May

Notary Public: Jana K. Swartz

Date Commission Expires: 10-25-08

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ven Orig to Prod. Dept 6/1/05

RECEIVED

MAY 31 2005

KCC WICHITA

Operator Name: Eagle River Energy Corporation Lease Name: O. Pundsack Well # 1
 Sec. 30 Twp. 21 S. R. 13 East West County: Stafford

ORIGINAL

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 type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: No drilling reports in files | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum |
|--|---|

| Original completion 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 | # Sacjs Used | Type and Percent Additives |
| | | 8 5/8 | 32 | 207 | | 175 | |
| | | 5 1/2 | 14 | 3780 | | 125 | |
| | | | | | | | |

| 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 | | Acid, Fracture, Shot, Cement Squeeze Record | | Depth |
|----------------|---|--|---|--|-------|
| | Specify Footage of Each Interval Perforated | | (Amount and Kind of Material Used) | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| | | | | |
|----------------------|---------------|----------------|-------------------|--|
| TUBING RECORD | Size 2 3/8 | Set At 3812 | Packer At 3730 | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No |
|----------------------|---------------|----------------|-------------------|--|

| | |
|--|--|
| Date of First, Resumerd Production, SWD or Enhr. 8/3/65 | Producing Method <input type="checkbox"/> Flowing <input 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 |
|-----------------------------------|-----------|---------|-------------|---------------|---------|

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) _____