

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

ORIGINAL

Operator: License # 30329
Name: Thomas Well Service, Inc.
Address: P.O. Box 97
City/State/Zip: Mclouth, KS 66054
Purchaser: _____
Operator Contact Person: Bobby G. Thomas
Phone: (913) 758-0175
Contractor: Name: Company Tool
License: _____
Wellsite Geologist: _____

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: Caporale Exploration Company
Well Name: H. Heim #7

Original Comp. Date: Est. Mar '91 Original Total Depth: 1490'
 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. Pending

01-15-98 12-01-00
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 103-21,235-00-01
County: Leavenworth
C W 1/2 SE Sec. 27 Twp. 8 S S. R. 21 East West
1320 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: H. Heim Well #: 7

Field Name: Easton
Producing Formation: Mclouth
Elevation: Ground: 1040' Kelly Bushing: N/A
Total Depth: 1490' Plug Back Total Depth: 1485'

Amount of Surface Pipe Set and Cemented at 80ft & cement to 0' Feet
Multiple Stage Cementing Collar Used? Yes No
Yes, show depth set _____ Feet
Alternate II completion, cement circulated from 1490
feet depth to Surface w/ 194 sx cmt.

RECEIVED
RECOMPLETION
CONSERVATION DIVISION
KANSAS CORPORATION COMMISSION
Grouting Fluid Management Plan OWWO KGR 8/21/07
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.: _____

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: Bob G. Thomas, Pres.
Title: PRESIDENT Date: 2-14-01
Subscribed and sworn to before me this 14 day of February
2001
Notary Public: Marie DeMaranville
Date Commission Expires: 6/25/03

KCC Office Use ONLY
____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

NOTARY PUBLIC
STATE OF KANSAS
Marie DeMaranville
My Appt. Exp. 6/25/03

ORIGINAL

Operator Name: Thomas Well Service, Inc. Lease Name: H. Heim Well #: 7
 Sec. 27 Twp. 8 S S. R. 21 East West County: Leavenworth

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy) List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum Mclouth 1426' 1434'
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RECEIVED
STATE CORPORATION COMMISSION

FEB 23 2001

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used CONSERVATION DIVISION Wichita, Kansas							
Report all strings set-conductor, surface, intermediate, production							
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 "	20	80'	Portland A	48	2% Gel 3% Cal
Production	6 1/2 "	4 1/2 "	9.5	1485'	Port & OWC	194	6%Gel & AY-21

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 (Amount and Kind of Material Used)	Depth
4	1426' to 1434'	80 sx 10x20 Sand & 30sx 8x12 Sand	
		7,140 gal. 30# x link	

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, Resumed Production, SWD or Enhr. Pending KCC Approval	Producing Method <input 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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
			50 to 100 BWD		

Disposition of Gas: Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled 1426' to 1434'

Other (Specify) _____

STATION Ottawa OPERATOR Fred Mader

Ticket 79715

CONSOLIDATED OIL WELL SERVICES, INC.

P.O. Box 884
Chanute, Kansas 66720
Phone (316) 431-9210

ORIGINAL

Date <u>3-20-91</u>	Customer's Acct. No.	Sec. <u>27</u>	Twp. <u>8</u>	Range <u>21</u>	Well No. & Farm <u>H. Heim 7</u>	Place or Destination <u>Easton</u>
Range To <u>Capacade Exploration Inc</u>				Owner		County <u>Leavenworth</u>
Mailing Address <u>P.O. Box 1515</u>				Contractor <u>McGowan Drilling</u>		State <u>Ks.</u>
City & State <u>Cheyene WY 82003</u>				Well Owner Operator Contractor		

CEMENTING SERVICE DATA

TYPE OF JOB	CASING	HOLE DATA	PLUGS AND HEAD	PRESSURE	CEMENT LEFT IN CASING
Surface	New	Bore Size <u>12 1/4</u>	Bottom	Circulating <u>100</u>	Requested
	Used	Total Depth <u>80'</u>	Top	Minimum	Necessity
Size	Size <u>8 7/8</u>		Head <u>BV. Sudg</u>	Maximum <u>200</u>	Measured
Weight	Weight	Cable Tonnage	FLOAT EQUIPMENT	Sacks Cement <u>48</u>	
Depth <u>80'</u>	Depth	Rotary		Type & Brand <u>Portland H.</u>	
Type	Type			Admixes <u>2% Gel 3% Calcium</u>	

FRACTURING - ACIDIZING SERVICE DATA

Type of Job	At Intervals of					
Breakdown Pressure from	psi to		psi			
Minimum Pressure	psi	Minimum	psi	Avg. Pump Rate	GPM/BPM	Close In
Gels	Gels, Treating Acid		Type		Open Hole Diameter	
Well Logging Through Logging	Casing	Annulus	Size	Weight		
Pay Formation Name					Depth of Job	ft

INVOICE SECTION

CEMENTING				FRACTURING - ACIDIZING			
Pumping Charge <u>1 surface</u>				Pumping Charge			
Pumping Charge	@ <u>5.40</u>	Office Use	\$ <u>325.00</u>	Pumping Charge	@	Office Use	\$
<u>248</u> Sacks Bulk Cement	@ <u>5.25</u>	1101	<u>252.00</u>	12x30 Sand	@		
Ton Mileage on Bulk Cement	<u>65</u> @ <u>.75</u>	6401	<u>112.45</u>	10x20 Sand	@		
<u>15x</u> Premium Gel	@ <u>6.90</u>	1301	<u>69.00</u>	x Sand	@		
Flt Seal	@			Ton Mileage	@		
<u>25x</u> Calcium Chloride	@ <u>21.00</u>	1303	<u>42.00</u>	Gels, Acid	@		
Plug	@			Chemicals	@		
Equipment	@				@		
	@				@		
	@				@		
	@			Potassium Chloride	@		
	@			Rock Salt	@		
Granulated Salt	@			Water Gel	@		
Transport Truck (Hrs.)	@			Transport Truck (Hrs.)	@		
Vac Truck (<u>5</u> Hrs.)	@ <u>44.00</u>	6201	<u>220.00</u>	Vac Truck (Hrs.)	@		
	@				@		
		Tax	<u>15.80</u>			Tax	
Total			\$ <u>974.15</u>	Total			\$

A Finance Charge computed at 1 1/2% per month (annual percentage rate of 21%) will be added to balance over 30 days.

119925

STATION Ottawa OPERATOR Fred Wader
CONSOLIDATED OIL WELL SERVICES, INC.

P.O. Box 884
 Chanute, Kansas 66720
 Phone (316) 431-9210

Ticket **79705**
ORIGINAL

Date <u>3-22-91</u>	Customer's Acct. No.	Sec. <u>27</u>	Twp. <u>8</u>	Range <u>21</u>	Well No. & Farm <u>H. Heim #7</u>	Place or Destination <u>Easton</u>
Change To	Owner <u>Caporale Exploration</u>				County <u>Leavenworth</u>	
Mailing Address <u>P.O. Box 1515</u>	Contractor <u>McGraw Drilling</u>				State <u>Ks.</u>	
City & State <u>Cheyenne, WY 82003</u>	Well Owner Operator Contractor <u>Ted Simola</u>					

CEMENTING SERVICE DATA

Cement	CASING		HOLE DATA		PLUGS AND HEAD		PRESSURE		CEMENT LEFT IN CASING	
	New	Used	Bore Size	Total Depth	Bottom	Top	Circulating	Minimum	Requested	Necessity
			<u>6 1/2</u>	<u>1490'</u>	<u>1.5W</u>		<u>200</u>			
		<u>4 1/2</u>			<u>PL</u>		<u>600</u>			
	Weight		Cable Tool		FLOAT EQUIPMENT		Sacks Cement	<u>194</u>		
	Depth	<u>1485'</u>	Rotary	<u>-</u>			Type & Brand	<u>Portland A-OWC & Perk</u>		
	Type	<u>SRP</u>					Admixes	<u>6% from Gel, AY-21 Flu</u>		

FRACTURING - ACIDIZING SERVICE DATA

At intervals of _____

Breakdown Pressure from _____ psi to _____ psi

Maximum _____ psi Minimum _____ psi Avg. Pump Rate _____ GPM/BPM Close In _____ p

Gels, Treating Acid _____ Type _____ Open Hole Diameter _____

Casing _____ Annulus _____ Size _____ Weight _____

Pay Formation Name _____ Depth of Job _____ Ft.

CEMENTING INVOICE SECTION FRACTURING - ACIDIZING

Item	Unit	Office Use	Office Use	Item	Unit	Office Use	Office Use
1 well							
194 Sacks Bulk Cement	@	See Below		12x30 Sand	@		
6.5 Ton Mileage on Bulk Cement	@ 105.00	6401	670.50	10x20 Sand	@		
6.5 Premium Gel	@ 6.90	1301	44.85	x Sand	@		
1 lb Seal	@			Ton Mileage	@		
1 lb Barium Chloride	@			* Gels., Acid	@		
1.4 lb Plun	@ 22.50	4408	63.50	NOTE: Chemicals	@		
26 Gall AY-21	@ 21.00	1207	546.00	Used Extra OWC	@ on Below		
Equipment	@				@		
99 Sx Portland 6% 95 Sx OWC *	@ 5.25 @ 6.40	1101 1102	519.75 627.00		@		
	@				@		
	@			Potassium Chloride	@		
	@			Rock Salt	@		
Granulated Salt	@			Water Gel	@		
Transport Truck (Hrs.)	@			Transport Truck (Hrs.)	@		
Vac Truck (10 Hrs.) Total	@ 44.00	6201	440.00	Vac Truck (Hrs.)	@		
	@				@		
		Tax	65.56			Tax	
		Total	\$ 2391.91			Total	\$

A Finance Charge computed at 1 1/2% per month (annual percentage rate of 21%) will be added to balance over 30 days.

119926