

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

ORIGINAL

API NO. 15- 135-24116-0000

County Ness

C - S/2 - SW - SW Sec. 8 Twp. 17S Rge. 25 X ^E _W

330 Feet from (S)N (circle one) Line of Section

660 Feet from E(W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Stutz "H" Well # 3

Field Name Stutz East

Producing Formation Mississippi

Elevation: Ground 2536' KB 2541'

Total Depth 4500' PBDT _____

Amount of Surface Pipe Set and Cemented at 228 Feet

Multiple Stage Cementing Collar Used? Yes No

If _____, show depth set _____ Feet

Alternate II completion, cement circulated from _____

Depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT #2
Data must be collected from the Reserve Pit KJR 7/18/07

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 Rng. _____ E/W

County _____ Docket No. _____

Operator: License # 30742

Name: Palomino Petroleum, Inc.

Address 4924 SE 84th St.

City/State/Zip Newton, KS 67114-8827

Purchaser: EOTT

Operator Contact Person: Klee R. Watchous

Phone (316) 799-1000

Contractor: Name: Pickrell Drilling Company

License: 5123

Wellsite Geologist: James W. Thompson

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Test Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, _____)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBDT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

10/23/00 11/2/00 11/2/00

Spud Date Date Reached TD Completion Date

RECEIVED
STATE CORPORATION COMMISSION
Wichita, Kansas
DEC 11 2000

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 on 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 Klee R. Watchous

Title President Date 12/7/00

Subscribed and sworn to before me this 7th day of December, 19X 00.

Notary Public Carla R. Penwell

Carla R. Penwell

Date Commission Expires 10-6-01

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Geologist Report Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other (Specify)

NOTARY PUBLIC - State of Kansas
CARLA R. PENWELL
My Appt. Expires 10-6-01

Operator Name Palomino Petroleum, Inc. Lease Name Stutz "H" Well # 3

Sec. 8 Twp. 17S Rge. 25 East West
 County Ness

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ELI Wireline		
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Anhy.	1880	(+661) to 1913
List All E.Logs Run:		Topeka	3508	(-967)
Radiation Guard Log		Heeb.	3832	(-1291)
		LKC	3872	(-1331)
		Marm.	4213	(-1672)
		Pawnee	4299	(-1758)
		Ft. Scott	4373	(-1832)
		Cherokee	4398	(-1857)
		Detrital Chert	4453	(-1912)

CASING RECORD							
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		8 5/8"	20#	228	pozmix	170	2%gel 3%c.c.
Production		5 1/2"	14#	4493	pozmix	200	2%gel 10% salt

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		pozmix	185	60-40 pozmix, 2% gel, 10% salt with 1/4 # Flocele

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	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 11/11/00			Producing Method <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. 10 BOPD	Gas Mcf	Water Bbls. 15 BWPD	Gas-Oil Ratio	Gravity	

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: _____

SWIFT SERVICES, II

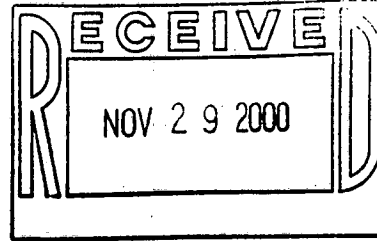
PO BOX 466

NESS CITY, 67560-0466

ORIGINAL Invoice

DATE	INVOICE #
11/7/00	2853

BILL TO
Palomino Petroleum Inc. 4924 S E 84th Street Newton, KS 67114-8827



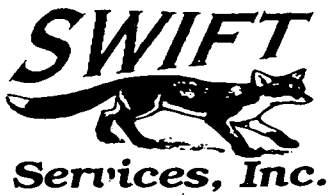
TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Operator	Job Purpose
Net 30	3	Stutz "H"	Ness		Oil	Development	Lenny	Cement Port ...

PRICE REFERENCE...	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
575D	Milage	25	2.50	62.50
577D	Pump Charge	1	700.00	700.00
105	Port Collar Tool Rental with man	1	400.00	400.00T
330	Swift Multi-Density	175	9.50	1,662.50T
276	Flocele	50	0.90	45.00T
581D	Service Charge Cement	200	1.00	200.00
583D	Drayage	249.63	0.75	187.22
	Subtotal			3,257.22
	Sales Tax		4.90%	103.27

Thank you for your business.

Total

\$3,360.49



CHARGE TO: *Palomino Petroleum*

ADDRESS:

CITY, STATE, ZIP CODE:

ORIGINAL

TICKET
N2 2853

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Ness City</i>	WELL/PROJECT NO. 3	LEASE <i>Stutz "H"</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>KS</i>	CITY	DATE <i>11-7-00</i>	OWNER <i>Same</i>
2.	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. <i>Mobil</i>	SHIPPED VIA <i>105</i>	DELIVERED TO <i>S. W. Ransom</i>	ORDER NO.	
3.	WELL TYPE <i>oil</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Cement Port Collar</i>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>		<i>1</i>			<i>MILEAGE 105</i>	<i>25</i>	<i>mi</i>			<i>2.50</i>	<i>62.50</i>
<i>577</i>		<i>1</i>			<i>Pump Charge</i>	<i>1</i>	<i>EA</i>				<i>700.00</i>
<i>105</i>		<i>1</i>			<i>Port Collar opening tool w/man</i>	<i>1</i>	<i>EA</i>				<i>400.00</i>
<i>330</i>		<i>1</i>			<i>5m Ø Cement</i>	<i>175</i>	<i>SKS</i>			<i>9.50</i>	<i>1662.50</i>
<i>276</i>		<i>1</i>			<i>flocele</i>	<i>50</i>	<i>lbs</i>			<i>.90</i>	<i>45.00</i>
<i>581</i>		<i>1</i>			<i>Bulk Service Charge</i>	<i>200</i>				<i>1.00</i>	<i>200.00</i>
<i>583</i>		<i>1</i>			<i>Drayage</i>	<i>249.63</i>		<i>T.M.</i>		<i>.75</i>	<i>187.22</i>

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

x *Rich Schrek*

DATE SIGNED *11-7-00* TIME SIGNED *11:00* A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	<i>3257.22</i>
TAX	<i>103.27</i>
TOTAL	<i>3360.49</i>

ORIGINAL

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR *Lery* APPROVAL

Thank You!

CUSTOMER *Palovina Ret.* WELL NO. *3* LEASE *Stutz 'H'* JOB TYPE *Post Collar* TICKET NO. *2853*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	<i>10 30</i>							<i>On loc</i>
								<i>Isolate P.C. at</i>
						<i>1000</i>	<i>1000</i>	<i>Pressure test 1000 OK</i>
		<i>2 1/2</i>				<i>400</i>		<i>open P.C. + Take inj rate</i>
			<i>95 BBL</i>			<i>500</i>		<i>ST mixing 200 SKS 5MDW/1/4" #5 Scale</i>
								<i>finish mixing Cement 175 SKS</i>
								<i>Disp to P.C.</i>
						<i>1000</i>	<i>1000</i>	<i>Close P.C. + Pressure test 1000 OK</i>
								<i>Run 5 JTs + Rev out</i>
	<i>13 00</i>							<i>Job Complete Cement 100 Cir C to Pit</i>
								<i>APPROX 20 SKS</i>

SWIFT SERVICES, II

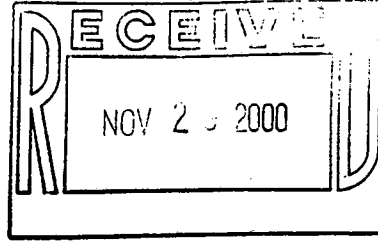
PO BOX 466

NESS CITY, 67560-0466

ORIGINAL Invoice

DATE	INVOICE #
11/2/00	2891

BILL TO
Palomino Petroleum Inc. 4924 S E 84th Street Newton, KS 67114-8827



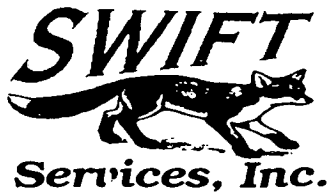
TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Operator	Job Purpose
Net 30	11-3	Stutz	Ness	Pickrell Drlg	Oil	Development	Roger	Cmt 5 1/2" pr...

PRICE REFERE...	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
575D	Milage	30	2.50	75.00
578D	Pump Service	1	1,200.00	1,200.00
410-5	Top Plug	1	50.00	50.00T
400-5	5 1/2" Guide Shoe	1	80.00	80.00T
401-5	5 1/2" Insert Float with Auto Fill	1	110.00	110.00T
402-5	5 1/2" Centralizers	6	40.00	240.00T
403-5	5 1/2" Cement Basket	2	110.00	220.00T
404-5	5 1/2" Port Collar	1	1,500.00	1,500.00T
281	Mud Flush	500	0.50	250.00T
326	60/40 Pozmix (2% gel)	200	5.20	1,040.00T
283	Salt	1,000	0.15	150.00T
276	Flocele	25	0.90	22.50T
581D	Service Charge Cement	200	1.00	200.00
583D	Drayage	261.98	0.75	196.49
	Subtotal			5,333.99
	Sales Tax		4.90%	179.46

Thank you for your business.

Total

\$5,513.45



CHARGE TO: *Palomino Petroleum*
 ADDRESS:
 CITY, STATE, ZIP CODE:

TICKET No 2891
 ORIGINAL
 PAGE 1 OF 2

SERVICE LOCATIONS 1. *Ness City, Ks.*
 WELL/PROJECT NO. *11-3* LEASE *Stutz* COUNTY/PARISH *Ness* STATE *Ks.* CITY DATE *11-2-00* OWNER *Same*
 2. TICKET TYPE SERVICE CONTRACTOR *Pickrell Drlg.* RIG NAME/NO. SHIPPED VIA *217* DELIVERED TO *Location* ORDER NO.
 3. WELL TYPE *Oil* WELL CATEGORY *Development* JOB PURPOSE *Cement 5 1/2" Production Csg.* WELL PERMIT NO. WELL LOCATION *See 8-17-25*
 4. REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE		AMOUNT	
		LOC	ACCT	DF									
575		1			MILEAGE #103	30	mil			2	50	75	00
578		1			Pump Service	1	ea			1,200	00	1,200	00
410		1			S-W Tap Plug	1	ea	5 1/2	in	50	00	50	00
400		1			Guide Shoe	1	ea	"		80	00	80	00
401		1			Insert Float valve	1	ea	"		110	00	110	00
402		1			Centralizers	6	ea	"		40	00	240	00
403		1			Cent. Bore Bit	2	ea	"		110	00	220	00
404		1			Port Collar	1	ea	"		1,500	00	1,500	00
281		1			Mud Flush	500	gal			50	00	250	00
<i>See Page #2</i>												1,608	99

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions.
 MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS
 X *Reed Schreiber*
 DATE SIGNED TIME SIGNED A.M. P.M.

REMIT PAYMENT TO:
 SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				5,333
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO		
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				TAX 179.46
				TOTAL 5513.45

ORIGINAL

JOB LOG

SWIFT Services, Inc.

ORIGINAL

DATE 7-2-00

PAGE NO.

CUSTOMER *Pilamin Pet.* WELL NO. *11-3* LEASE *Stutz* JOB TYPE *Log String* TICKET NO. *2891*

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0700							On loc. Rig laying down Drill pipe
	0630							Start in hole with 5 1/2" Csg.
								Guide Shoe, Insert Float
								Cent. on #1, #3, #5, #8, #11, #72
								Basket on #2, #73
								Port Collar Top of #73 @ 1837'
	0930							Deep Bull
	0900							Circulate around csg find TD
	10:05							Pump 500gal mud Flush
	10:10							Plug Rest hole 155lb
	10:15	4						MEX 2000lb 60/40 Poz 2% Gel, 10% salt, 1/4" Flocc
								Finished mixing wash pump & line
	10:35	5						Diaph. Top Plug
	11:00		109				1200	Plug down 1200psf holding Release press. Float held wash & Rack up track Job Complete

Handwritten signature
1000
404
Ry

SWIFT SERVICES, INC.

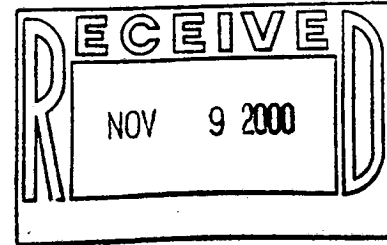
PO BOX 466

NESS CITY, 67560-0466

ORIGINAL Invoice

DATE	INVOICE #
10/23/00	2670

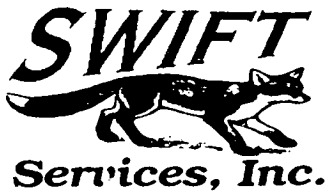
BILL TO
Palomino Petroleum Inc. 4924 S E 84th Street Newton, KS 67114-8827



TERMS	Well No.	Lease	County	Contractor	Well Type	Well Category	Operator	Job Purpose
Net 30	3	Stutz "H"	Ness		Oil	Development	Lenny	Surface

PRICE REFERE...	DESCRIPTION	QTY	UNIT PRICE	AMOUNT
575D	Milage	30	2.50	75.00
576D-S	Pump Charge	1	500.00	500.00
326	60/40 Pozmix (2% gel)	170	5.20	884.00T
278	Calcuim Chloride	4	25.00	100.00T
581D	Service Charge Cement	170	1.00	170.00
583D	Drayage	215.09	0.75	161.32
	Subtotal			1,890.32
	Sales Tax		4.90%	48.22

Thank you for your business.	Total	\$1,938.54
-------------------------------------	--------------	------------



CHARGE TO: *Palomiro Pet.*

ADDRESS:

CITY, STATE, ZIP CODE:

ORIGINAL

TICKET
 N2 2670

PAGE 1 OF 1

SERVICE LOCATIONS
 1. *Ness City Ks*

WELL/PROJECT NO. *3* LEASE *Stutz 'H'* COUNTY/PARISH *Ness* STATE *Ks* CITY DATE *10-23-00* OWNER *Same*

TICKET TYPE SERVICE SALES CONTRACTOR RIG NAME/NO. *Pickre 11* SHIPPED VIA *105* DELIVERED TO *S.E. Utica Ks* ORDER NO.

WELL TYPE *Oil* WELL CATEGORY *Development* JOB PURPOSE *Surface* WELL PERMIT NO. WELL LOCATION

REFERRAL LOCATION INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M.		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>					<i>MILEAGE 105</i>	<i>30</i>	<i>mi</i>			<i>2.50</i>	<i>75.00</i>
<i>576</i>					<i>Pump Charge</i>	<i>1</i>	<i>EA</i>				<i>500.00</i>
<i>6326</i>					<i>60/40 2% Sol</i>	<i>170</i>	<i>ks</i>			<i>5.20</i>	<i>884.00</i>
<i>278</i>					<i>Calcium Chloride</i>	<i>4</i>	<i>SKS</i>			<i>25.00</i>	<i>100.00</i>
<i>581</i>					<i>Bulk Service Charge</i>	<i>170</i>					<i>170.00</i>
					<i>Drayage</i>	<i>215</i>	<i>09</i>	<i>T.M.</i>			<i>161.32</i>

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X *Mike Kern*

DATE SIGNED *10-23-00* TIME SIGNED *7:00* A.M. P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
 P.O. BOX 466
 NESS CITY, KS 67560
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				<i>1890.32</i>
WE UNDERSTOOD AND MET YOUR NEEDS?				
OUR SERVICE WAS PERFORMED WITHOUT DELAY?				
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX <i>48.22</i>
ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO				TOTAL <i>1938.54</i>
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR *Sherry* APPROVAL

Thank You!

