

Corrected

TO State Field 8/14/00

Form ACO-1

September 1999

Form Must Be Typed

Oil & Gas Conservation Division

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

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. _____

8/8/00	8/9/00	8/9/00
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 207 - 26669-0000
 County: Woodson
 - NW - SW Sec. 35 Twp. 23 s R. 16 East
1980 feet from S N (circle one) Line of Section
4620 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 A Well # PW-39
 Field Name: Vernon
 Producing Formation: Squirrel
 Elevation: Ground 1026' Kelly Bushing: _____
 Total Depth: 1070' Plug Back TD: 1021.2
 Amount of Surface Pipe Set and Cemented: 42.40'

Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____
 If Alternate II completion, cement circulated from 1060'
 feet depth to Surface w/ 116 sx. cmt.

Drilling Fluid Management Plan *Amended Alt 2 KJR 7/18/07*
 (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 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 (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.

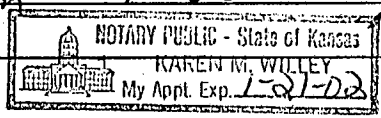
RECEIVED
 KANSAS CORPORATION COMMISSION
 DEC 26 2000

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: 9/12/00

Suscribed and sworn to before me this 12th day of Sept, 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

Operator Name: Phoenix Kansas Energy, LLC. Lease Name: Alexander 'B' Well #: PW-39

Sec. 35 Twp. 23 s R 16 East West

Instructions: Show important tops and base formations penetrated. Detail all cores. Report all final copies of drill stems test giving interval tested, lime tool open and closed, flowing and shut-in pressures, whether 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 Yes No
(Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample

Name Top Datum

See Attached Logs

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"		42.40'	Portland	10	
Production	8 5/8"	2 7/8"		1060'	Portland	116	

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
2	1005'-1015'	100 gals. 15% HCl	
		200 lbs. 20/40 mesh sand	
		1300 lbs. 12/20 mesh sand	
		100 lbs. salt	

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SWD or Enhr. Producing Method

Flowing Pumping Gas Lift 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

Other (Specify) _____