

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED

AUG 14 2001

Form ACO-1
September 1999
Form Must Be Typed

KCC WICHITA

007-210910001

Operator: License # 5039

Name: AGV Corp.

Address: 123 N Main

City/State/Zip: Attica, Ks 67009

Purchaser: Utilicorp

Operator Contact Person: P. John Eck

Phone: (620) 254-7222

Contractor: Name: Jimenez Well Service Inc.

License: None

Wellsite Geologist: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

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

If Workover/Re-entry: Old Well Info as follows:

Operator: Robinson Oil Company

Well Name: Landwehr "B" #1

Original Comp. Date: 4-20-96 Original Total Depth: 4620

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. _____

4/20/01 4/20/01 4/20/01

Spud Date or Date Reached TD Completion Date or Recompletion Date

Workover Workover

API No. 15 - _____

County: Barber

SW SE NE Sec. 6 Twp. 33 S. R. 10 East West

2970 feet from S / N (circle one) Line of Section

990 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Landwehr B Well #: 1

Field Name: Traffas

Producing Formation: Mississippi/Cherokee sand

Elevation: Ground: 1566 Kelly Bushing: 1576

Total Depth: 4620 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at _____ 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 No Pits or mud

(Data must be collected from the Reserve Pit) OWWO KJR 7/12/07

Chloride content _____ ppm Fluid volume _____ bbis

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: P. John Eck

Title: President Date: 8-13-01

Subscribed and sworn to before me this 13 day of August

2001

Notary Public: Larry G Mans

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: AGV Corp. Landwehr B
 Lease Name: _____ Well #: 13
 Sec. 6 Twp. 33 S. R. 10 East West County: Barber

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

CASING RECORD <input 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

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
				Depth

TUBING RECORD Size 2 3/8 Set At 4560 Packer At None Liner Run Yes No

Date of First, Resumerd Production, SWD or Enhr. 4/23/01 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 0 Bbls. Gas 80 Mcf Water 3 Bbls. Gas-Oil Ratio Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.) METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval 4547.5' - 4552.5'
4565' - 4570'