

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

RECEIVED
KANSAS CORPORATION COMMISSION Form KCC-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OCT 05 2001

ORIGINAL

Operator: License # 31897
Name: Foundation Resources, LLC
Address: P.O. Box 789
City/State/Zip: Goddard, KS 67052
Purchaser: none
Operator Contact Person: Robert Stolzle
Phone: (316) 794-3400
Contractor: Name: Plains, Inc.
License: 4072
Wellsite Geologist: none

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: The National Oil Co.
Well Name: Breit #1

Original Comp. Date: 6/15/79 Original Total Depth: 4554'

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. D-27,873

6/2/01 6/11/01 6/12/01
Spud Date or Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 135-21,554-0001
County: Ness

SE-SE Sec. 8 Twp. 16 S. R. 25 East West
660 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:
(circle one) NE SE NW SW

Lease Name: Breit Well #: 1-SWD

Field Name: Arnold, NW

Producing Formation: Miss. Warsaw

Elevation: Ground: 2576' Kelly Bushing: N.A.

Total Depth: 984' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 327' 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

(Data must be collected from the Reserve Pit)

Chloride content 5,000 ppm Fluid volume 100 bbls

Dewatering method used solar drying

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: Robert Stolzle
Title: Member Date: 9/27/01

Subscribed and sworn to before me this 27TH day of SEPTEMBER

Notary Public: Janice K. Bright

Date Commission Expires: 3-26-05

SEPTEMBER
JANICE K. BRIGHT
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. _____

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received None Found
 Geologist Report Received None Kept
 UIC Distribution

Operator Name: Foundation Resources, LLC Lease Name: Breit Well #: 1-SWD
 Sec. 8 Twp. 16 S. R. 25 East West County: Ness

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

Note: Attempted to washdown hole P&A 6/15/79. Got to T.D. of 1020' and stuck tubing collars in hole. Got approval to plug hole from T.D. to surface. Replugged hole 6/12/01. Cementing tickets are attached.

CASING RECORD New 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	# Sacs Used	Type and Percent Additives

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	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) _____



CHARGE TO: *Foundation Resources*

ADDRESS:

CITY, STATE, ZIP CODE:

RECEIVED
KANSAS CORPORATION COMMISSION

TICKET
No 3569

OCT 05 2001

PAGE 1 OF 1

SERVICE LOCATIONS 1. <i>Ness City, KS</i>	WELL/PROJECT NO. <i>"1 SWD"</i>	LEASE <i>Brat</i>	COUNTY/PARISH <i>Ness</i>	STATE <i>Ks.</i>	CITY <i>WICHITA, KS</i>	DATE <i>6-17-01</i>	OWNER <i>Same</i>
2.	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <i>Plain Well Serv.</i>	RIG NAME/NO.	SHIPPED <i>VIA</i>	DELIVERED TO <i>Location</i>	ORDER NO.	
3.	WELL TYPE <i>Drill</i>	WELL CATEGORY <i>Development</i>	JOB PURPOSE <i>Plug to Abandon</i>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
<i>575</i>		<i>1</i>			<i>MILEAGE "103"</i>	<i>25</i>	<i>mi</i>			<i>2.72</i>	<i>62</i>
<i>576</i>		<i>1</i>			<i>Pump Service</i>	<i>1</i>	<i>ea.</i>			<i>500.00</i>	<i>500</i>
<i>581</i>		<i>1</i>			<i>Service Charge</i>	<i>110</i>	<i>hr</i>			<i>1.00</i>	<i>110</i>
<i>582</i>		<i>1</i>			<i>Drayage</i>						<i>100</i>
<i>328</i>		<i>1</i>			<i>60/40 p.2 6% CC</i>	<i>110</i>	<i>sh</i>			<i>5.65</i>	<i>621</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 *[Signature]*

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
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>1,394</i>
TAX	
TOTAL	

ORIGINAL

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

SWIFT OPERATOR: *[Signature]*

APPROVAL: _____

Thank You!

JOB LOG

SWIFT Services, Inc.

ORIGINAL

DATE 6/12/01 PAGE NO. 1

CUSTOMER: Delmar Co. WELL NO. 11509 LEASE For - JOB TYPE Plug To Monitor TICKET NO. 3569

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL)(GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	12:00							On hole 2 7/8" and 2 1/2"
	12:10		14.5					Rig start on hole with 2 7/8" tubing Load hole 6'
	12:10		5					run 50' 2 1/4" P ₂ 6% FF Dial to Balance @ 900'
	12:15		14.5					Pull tubing to 360'
	12:15		2					run 50' 2 1/4" P ₂ 6% FF Dial to Balance
	12:45							Pull tubing out of hole run 10' 2 1/4" P ₂ 40' 1 1/2" P ₂ Work and reading toward Job complete

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 WICHITA, KS
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 CONSERVATION DIVISION

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