

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 03194
Name: Tri United, Inc
Address: 950 270th Ave
City/State/Zip: Hays, Ks 67601
Purchaser: Plains
Operator Contact Person: Eugene Leiker
Phone: (785) 628-3670
Contractor: Name: Tri United, Inc.
License: 03194

Wellsite Geologist: Eugene Leiker
Designate Type of Completion:
 New Well Re-Entry Workover OWWO
 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: Darby Oil Trading & C-G Drilling

Well Name: Vine A-4
Original Comp. Date: 10-25-57 Original Total Depth: 3698'

Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
SWD Other (SWD or Enhr.?) Docket No. _____

9-29-06 11-17-06 12-13-06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 051-03519-00-01
County: Ellis
SW NE NE Sec. 35 Twp. 11 S. R. 19 East West
4290 4270 feet from (S) N (circle one) Line of Section
990 1008 feet from (E) W (circle one) Line of Section
Footages Calculated from GPS-KCC-D18 Nearest Outside Section Corner:

(circle one) NE (SE) NW SW
Lease Name: Vine Well #: A-4
Field Name: Solomon Southeast

Producing Formation: SWD (Cedar Hills)
Elevation: Ground: 2111 Kelly Bushing: 2116
Total Depth: 1453' Plug Back Total Depth: 1430'
Amount of Surface Pipe Set and Cemented at 185' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1453'
feet depth to Surface w/ 350 sks _____ sx cm.

Drilling Fluid Management Plan SWD NH 6-18-08
(Data must be collected from the Reserve Pit)

Chloride content 23,000 ppm Fluid volume 210 bbls
Dewatering method used Evaporation

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: Eugene E Leiker
Title: President Date: 1-15-07

Subscribed and sworn to before me this 15th day of Jan,
20 07.

Notary Public: Roberta Angell
Date Commission Expires: 10-24-08

ROBERTA ANGELL
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 10-24-08

KCC Office Use ONLY

N Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received **RECEIVED**
 UIC Distribution **KANSAS CORPORATION COMMISSION**
JAN 23 2007

CONSERVATION DIVISION
WICHITA, KS

Operator Name: Tri United, Inc. Lease Name: VINE Well #: A-4
 Sec. 35 Twp. 11 S. R. 19 East West County: Ellis

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: None

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 ANH 1450 666
 Cedar hills 972 1144

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	# Sacks Used	Type and Percent Additives
Prod	7 7/8	4 1/2	10.5	1453'	60/40 Poz	350sks	2% gel
Surface	13 1/4	8 5/8	20	185'	common	150sks	

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
1 per Ft	From 1130' to 1160'		

TUBING RECORD	Size	Set At	Packer At	Liner Run
Duolined	2 3/8	1004'	1008'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production <u>SWD</u> or Enhr.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (swd Vacume) (Explain)			
12-21-2006				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
na	na	na		

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 _____

RECEIVED
KANSAS CORPORATION COMMISSION
JAN 23 2007
CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC.

33424

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <u>11-17-06</u>	SEC. <u>35</u>	TWP. <u>11</u>	RANGE <u>19</u>	CALLED OUT <u>12:30 PM</u>	ON LOCATION <u>1:30 PM</u>	JOB START <u>5:30 PM</u>	JOB FINISH <u>6:30 PM</u>
LEASE <u>Vine</u>	WELL # <u>S.W.D. A-4</u>	LOCATION <u>Hays N. To Buckey Rd.</u>			COUNTY <u>Ellis</u>	STATE <u>KANSAS</u>	
<input checked="" type="radio"/> OLD <input type="radio"/> NEW (Circle one)				<u>4W 4IN 1/2W INTO</u>			

CONTRACTOR PROFESSIONAL Pulling Service OWNER _____

TYPE OF JOB DISPOSAL well SHORT STRING

HOLE SIZE _____ T.D. _____ CEMENT _____

CASING SIZE 4 1/2 DEPTH 1453' AMOUNT ORDERED 350 SK ⁶⁰/₉₀ 2% GEL

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 300 # MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 22 1/2 BBL

EQUIPMENT

PUMP TRUCK CEMENTER Chester

398 HELPER GARY

BULK TRUCK _____

362 DRIVER DOUG

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

Ran 4 1/2 csg to 1453', Load Hole, & received very good circulation. mixed all cement, clear line, & displaced 22 1/2 BBL. Cement circulated to surface, left shut in overnight @ 300#.

THANK'S

CHARGE TO: TRI UNITED

STREET _____

CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Eugene E. Leiber

RECEIVED
KANSAS CORPORATION COMMISSION

JAN 23 2007

CONSERVATION DIVISION
WICHITA, KS

HANDLING 357 TOTAL SK @ 1.90 678.30

MILEAGE 45 Tax Mile @ _____ 1445.00

TOTAL 5289.20

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 355.00

EXTRA FOOTAGE @ _____

MILEAGE 45 @ 6.00 270.00

MANIFOLD @ _____

TOTAL 1225.00

PLUG & FLOAT EQUIPMENT

4 1/2 Guide Shoe _____ 125.00

AFU INSERT @ _____ 215.00

TOTAL 340.00

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME