

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 30582
Name: MWK Petroleum Co.
Address: 2316 Leigh
City/State/Zip: Augusta, Kansas 67010
Purchaser: Maclaskey Oilfield Service
Operator Contact Person: Mike Kiser
Phone: (316) 775-3751
Contractor: Name: BPC Well Plugging
License: 32475
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: TXO Production Corp.
Well Name: Smith B6 - #1

Original Comp. Date: _____ Original Total Depth: _____
____ 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. _____
12/19/00 12/22/00 1/4/01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 015230060001
County: Butler
N/2 - NE NW Sec. 10 Twp. 29 S. R. 6 East West
330 feet from S (N) (circle one) Line of Section
1980 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Smith Well #: 2
Field Name: Snowden - McSweeny
Producing Formation: K.C.
Elevation: Ground: 1421 Kelly Bushing: _____
Total Depth: 2427 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at OWWO 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 OWWO RGR 12/19/07
(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 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: Michael W. Kiser
Title: Owner Date: 4/18/01
Subscribed and sworn to before me this 18th day of April,
2001.
Notary Public: Denise E. Lewis
Date Commission Expires: 4-1-02

DENISE E. LEWIS
Notary Public - State of Kansas
My Appt. Expires 4-1-02

KCC Office Use ONLY
____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: MWK Petroleum Co. Lease Name: Smith Well #: 2

Sec. 10 Twp. 29 S. R. 6 East West County: Butler

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input checked="" 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
Production	7 5/8"	4 1/2"	10.5#	2403		75	60/40 Pozmix
							2% Gel

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	2304 - 08 5 Shots	350 Gal 15% Muç Acid	
1	2312 - 2320 9 Shots	1000 Gal 15% Acid RES NE	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2 7/8"	2337		

Date of First, Resumerd Production, SWD or Enhr.	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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	10		30		38

Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input checked="" type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____
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SERVICE TICKET

UNITED CEMENTING & ACID CO., INC.

2653

BOX 712

EL DORADO, KANSAS 67042

PHONE AC 316-321-4680

DATE 12-22-00 COUNTY Butler

CHG. TO: MWK Pet. ADDRESS _____

ORIGINAL

CITY _____ STATE _____ ZIP _____

LEASE & WELL NO. Smith 2 SEC. _____ TWP. _____ RING. _____

CONTRACTOR Braden Well Service TIME ON LOCATION 12:15 A

KIND OF JOB Production Cog

SERVICE CHARGE: Newwell 1770.00

QUANTITY	MATERIAL USED	TYPE	
75 ^{sf}	60/40 pg	@ 4.70 sf.	352.50 Δ
2 ^{sf}	Gal	@ 9.50 sf.	19.00 Δ
1	4 1/2 Guide Shoe	@ 71.00 ea	71.00 Δ
1	4 1/2 AFU Insert	@ 90.00 ea	90.00 Δ
3	4 1/2 Centerlines	@ 27.00 ea	81.00 Δ
77 ^{sf}	BULK CHARGE	89	108.53 Δ
27	BULK TRK. MILES	4.0 tons x 1.64 x 27mi (min chg)	85.00 Δ
	PUMP TRK. MILES	2.00 mi x 27mi (OneWay)	54.00
1	PLUGS	4 1/2 Top Rubber	38.00 Δ
	SALES TAX		47.50
	TOTAL		1670.53

T. D. 2409 CSG. SET AT 2409 VOLUME _____

SIZE HOLE 7 7/8 TBG SET AT _____ VOLUME _____

MAX. PRESS. 1000 SIZE PIPE 4 1/2

PLUG DEPTH 2399 PKER DEPTH _____

PLUG USED Top Rubber TIME FINISHED 3:00 A

REMARKS: Ran 4 1/2" to 2409' - Drop Ball - Pump Ball Through with 900# + Circulate - Pump 5 BBIS #2 ahead of 75 sf 60/40 pg 276 gal Wash out Pump + Line - Release Plug + Wireline Set Plug - Plug @ 1320' Cement @ Shoe 200# Plug @ 2299' Final Disp PSI 350# Bump Plug to 1000# Top @ 2399' - Release PSI AFU did not hold - Repeat to 200# + Shut in

EQUIPMENT USED
 NAME Chet Johnson UNIT NO. 14 NAME Jim Thomas UNIT NO. 7

Neal Rupp CEMENTER OR TREATER OWNER'S REP.