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KCC WICHITA

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 # 5435
Name: Bowers Drilling Company, Inc.
Address: 400 North Woodlawn, Suite 16
City/State/Zip: Wichita, Kansas 67208
Purchaser: ONEOK Field Services
Operator Contact Person: Emil E. Bowers
Phone: (316) 262-6449
Contractor: Name: Val Energy, Inc.
License: 5822
Wellsite Geologist: James C. Musgrove

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 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 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. _____

9/1001	9/19/01	9/19/01
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 007-22675-0000
County: Barber
NE-NE-SE Sec. 27 Twp. 32 S. R. 13 East West
2310 feet from (S) N (circle one) Line of Section
330 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Mee Well #: 2
Field Name: Medicine Lodge Boggs

Producing Formation: Mississippi
Elevation: Ground: 1668 Kelly Bushing: 1678
Total Depth: 4510 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 8 5/8" @ 305' 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 *Alt I KJR 1/16/08*
(Data must be collected from the Reserve Pit)
Chloride content 5000 ppm Fluid volume 1800 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: Emil E. Bowers
Title: President Date: 2/6/04

Subscribed and sworn to before me this 6th day of February, 2002.

Notary Public: Judy C. Ridder
Date Commission Expires: 6/14/04

JUDY C. RIDDER
STATE NOTARY PUBLIC
SEDGWICK COUNTY, KANSAS
MY APPT. EXP 6/14/04

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

Operator Name: Bowers Drilling Company, Inc. Lease Name: Mee Well #: 2
Sec. 27 Twp. 32 S. R. 13 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:

Dual Induction
Density/Neutron Log

Log Formation (Top), Depth and Datum Sample

Name Top Datum

See attached

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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	# Sacks Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	24#	305'	60/40	175	3% cc
Production	7 7/8"	4 1/2"	105#	4517'	60/40 Pos	200	3% cc

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 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)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval _____

Mee #2 - Drill Stem Tests

DST #1 3574-3676'
 45-45-60-60
 Strong Blow
 Recovered 30'M, 180' GWM, 750' GW

ISIP 709	IFP 114-323
FSIP 715	FFP 339-496

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DST #2 3878-3914'
 45-45-60-60
 Gas to surface in 5 minutes
 Recovered 195' SGCM, 60' GWM

ISIP 378	IFP 78-189
FSIP 375	FFP 186-207

DST #3 4431-4466'
 45-45-60-60
 Strong blow.
 Gas to surface in 46 minutes.
 Recovered 60' SGCM

ISIP 569	IFP 36-34
FSIP 560	FFP 34-40

ORIGINAL

<u>Formation</u>	<u>Log Depth</u>	<u>Sub-Sea Datum</u>
Howard	3118	-1440
Severy	3224	-1546
Topeka	3257	-1579
Elgin	3416	-1738
Elgin Sand	3592	-1914
Oread	3704	-2026
Heebner	3744	-2066
Toronto	3757	-2079
Douglas	3785	-2107
Upper Douglas Sand	3815	-2137
Lower Douglas Sand	3886	-2208
Lansing	3930	2252
Stark	4285	-2607
Base Kansas City	4351	-2673
Marmaton	4359	-2681
Mississippian	4431	-2753
Rotary Total Depth	4511	-2833
Log Total Depth	4510	-2832

(All tops and zones are corrected to Electric Log measurements.)

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ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# [REDACTED]

ORIGINAL

Invoice Number: 085343

Invoice Date: 09/18/01

Sold Bowers Drilling Co.
 To: 400 N. Woodlawn STE #16
 Wichita, KS
 67208-4333

Cust. I.D.: Bowers
 P.O. Number ...: Mel #2
 P.O. Date: 09/18/01

135

Due Date: 10/18/01
 Terms: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	105.00	SKS	6.6500	698.25	E
Pozmix	70.00	SKS	3.5500	248.50	E
Gel	3.00	SKS	10.0000	30.00	E
Chloride	6.00	SKS	30.0000	180.00	E
Handling	184.00	SKS	1.1000	202.40	E
Mileage min. chg.	1.00	MILE	100.0000	100.00	E
Surface	1.00	JOB	520.0000	520.00	E
Extra Footage	5.00	PER	0.5000	2.50	E
Mileage pmp trk	12.00	MILE	3.0000	36.00	E
Wooden plug	1.00	EACH	45.0000	45.00	E
Centralizers	3.00	EACH	55.0000	165.00	E

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$222.77
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2227.65
 Tax: 0.00
 Payments: 0.00
 Total: 2227.65

Disc. - 222.77

Cement Surface Pipe

2,004.88

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contractor to do work as is listed. The above work was

ALLIED CEMENTING CO., INC.

8271

ORIGINAL

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

SERVICE POINT

Med Lodge

DATE <i>9-11-01</i>	SEC <i>27</i>	TWP <i>32S</i>	RANGE <i>13W</i>	CALLED OUT <i>2:00 PM</i>	ON LOCATION <i>2:00 PM</i>	JOB START <i>4:00 PM</i>	JOB FINISH <i>4:15 PM</i>
LEASE <i>Med</i>	WELL # <i>2</i>	LOCATION <i>160 + 640 Hill Rd 65</i>		COUNTY <i>Barber</i>	STATE <i>KS</i>		
OLD OR NEW (Circle one)				<i>to scenic drive 1w 3N 4W 5th</i>			

CONTRACTOR <i>Val #2</i>	OWNER <i>Bowers Drlg Co</i>
TYPE OF JOB <i>Surface</i>	CEMENT
HOLE SIZE <i>12 1/4</i>	T.D. <i>305</i>
CASING SIZE <i>8 7/8 x 23'</i>	DEPTH <i>305</i>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX <i>150</i>	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	<i>15</i>
PERFS.	
DISPLACEMENT <i>18 1/2 BBLs Fresh H₂O</i>	

EQUIPMENT

PUMP TRUCK # <i>352</i>	CEMENTER <i>Justin Hart</i>
	HELPER <i>David Felio</i>
BULK TRUCK # <i>242</i>	DRIVER <i>Eric Brewer</i>
BULK TRUCK #	DRIVER

COMMON <i>A</i>	<i>105</i>	@ <i>6.65</i>	<i>698.25</i>
POZMIX	<i>70</i>	@ <i>3.55</i>	<i>248.50</i>
GEL	<i>3</i>	@ <i>10.00</i>	<i>30.00</i>
CHLORIDE	<i>6</i>	@ <i>30.00</i>	<i>180.00</i>
		@	
		@	
		@	
		@	
HANDLING <i>184</i>		@ <i>1.10</i>	<i>202.40</i>
MILEAGE <i>184-MONTMULL</i>			<i>100.00</i>
TOTAL			<i>1459.15</i>

REMARKS:

*Pipe on Bottom Break Circ
Mix 17.5 sx 60-40-2 3%cc
@ 14.8# - 39 BBLs
Release Plug Disa 18 1/2 BBLs
Fresh H₂O / Shut Head in
Cement in cellar left 15'
in casing*

SERVICE

DEPTH OF JOB	<i>305</i>		
PUMP TRUCK CHARGE	<i>0-300'</i>		<i>520.00</i>
EXTRA FOOTAGE	<i>5'</i>	@ <i>.50</i>	<i>2.50</i>
MILEAGE	<i>12</i>	@ <i>3.00</i>	<i>36.00</i>
PLUG	<i>wooden 8 1/4</i>	@ <i>45.00</i>	<i>45.00</i>
		@	
		@	
TOTAL			<i>603.50</i>

CHARGE TO: *Bowers Drlg Co*
STREET _____
CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<i>8 1/2</i>	<i>3-centralizers</i>	@ <i>55.00</i>	<i>165.00</i>
		@	
		@	
		@	
		@	
TOTAL			<i>165.00</i>

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.

TAX			
TOTAL CHARGE	<i>2227.15</i>		
DISCOUNT	<i>222.77</i>		
IF PAID IN 30 DAYS			

SIGNATURE *[Signature]*
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GREG AXLINE
PRINTED NAME

ORIGINAL

ALLIED CEMENTING CO., INC.
P.O. BOX 31
RUSSELL, KS 67665
PH (785) 483-3887
FAX (785) 483-5566
FEDERAL TAX ID# [REDACTED]

I N V O I C E

Invoice Number: 085425
Invoice Date: 09/28/01

Sold Bowers Drilling Co.
To: 400 N. Woodlawn STE #16
Wichita, KS
67208-4333

Cust I.D.: Bowers
P.O. Number: Mee #2
P.O. Date: 09/28/01
Due Date: 10/28/01
Terms: Net 30
Cement Prod. String - Mee 2

Item I.D./Desc.	Qty	Used	Unit	Price	Net	
Common	15	00	SKS	6.6500	99.75	E
Pozmix	10	00	SKS	3.5500	35.50	E
Gel	1	00	SKS	10.0000	10.00	E
ASC	175	00	SKS	8.5000	1487.50	E
KolSeal	875	00	LBS	0.5000	437.50	E
ASF	500	00	GAL	1.0000	500.00	E
ClaPro	7	00	GAL	22.9000	160.30	E
Handling	250	00	SKS	1.1000	275.00	E
Mileage (12)	12	00	MILE	10.0000	120.00	E
250 sks @ \$.04 per sk per mi						
Production	1	00	JOB	1264.0000	1264.00	E
Mileage pmp trk	12	00	MILE	3.0000	36.00	E
Rubber Plug	1	00	EACH	48.0000	48.00	E
Reg. Guide Shoe	1	00	EACH	125.0000	125.00	E
AFU Insert	1	00	EACH	210.0000	210.00	E
Centralizers	8	00	EACH	45.0000	360.00	E

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1 1/2% Charged Thereafter.
If Account CURRENT take Discount of \$ 516.85
ONLY if paid within 30 days from Invoice Date

Subtotal: 5168.55
Tax: 0.00
Payments: 0.00
Total: 5168.55

4651.70

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ALLIED CEMENTING CO., INC. 08684

ORIGINAL

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665 SERVICE POINT: Medicine Lodge

DATE 9-19-01	SEC 27	TWP. 32S	RANGE 13W	CALLED OUT 5:00 pm	ON LOCATION 6:15 pm	JOB START 2:40 Am	JOB FINISH 3:15 Am
LEASE Mac	WELL # 2	LOCATION 160 + Gyp Hill Rd, 65,		COUNTY Barber	STATE KS		
OLD OR <u>NEW</u> (Circle one)				w/ 3N, w/ into			

CONTRACTOR Val #2

TYPE OF JOB production

HOLE SIZE 7 7/8 T.D. 4510'

CASING SIZE 4 1/2 x 10-5 DEPTH 4517'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 1250 MINIMUM 100

MEAS. LINE _____ SHOE JOINT 20.15

CEMENT LEFT IN CSG. _____

OWNER Bowers Drilling Co.

CEMENT AMOUNT ORDERED

25 sx 60:40:6	500 Gal	ASF
175 sx ASC + 5# Kol-seal	8 Gal	Claprd
COMMON A	15	@ 6.65 = 99.75
POZMIX	10	@ 3.55 = 35.50
GEL	1	@ 10.00 = 10.00
CHLORIDE		
ASC	175	@ 8.50 = 1487.50
KOL-SEAL	875#	@ 0.50 = 437.50
ASF	500 GALS	@ 1.00 = 500.00
CLAPRD	7 GALS	@ 22.90 = 160.30
HANDLING	250	@ 1.10 = 275.00
MILEAGE	250 x 12	.04 = 120.00
TOTAL 3125.55		

DISPLACEMENT 7 3/2 Bbls 27 KCL

EQUIPMENT _____

PUMP TRUCK CEMENTER Carl Bolding

#360-265 HELPER Mike Rucker

BULK TRUCK DRIVER Dwayne West

#240-290

BULK TRUCK DRIVER _____

REMARKS:

Run casing + Break circulation
Run 500 Gal ASF plug RAT+mouse tble
with 25sx 60:40:6 Mix + pump 175 sx
ASC + 5# Kol-seal wash pump + lines
Displace with 7 3/2 Bbls 27 KCL
Release pressure + Float Held

DEPTH OF JOB 4517'

PUMP TRUCK CHARGE 1264.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 12 @ 3.00 = 36.00

PLUG Rubber 4 1/2" @ 48.00 = 48.00

CHARGE TO: Bowers Drilling Co.

STREET _____

CITY _____ STATE _____ ZIP _____

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FLOAT EQUIPMENT

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1 Reg Guide Shoe	@ 125.00	125.00
1 AAU Insert	@ 210.00	210.00
8 Centralizer S	@ 45.00	360.00
TOTAL 695.00		

To Allied Cementing Co., Inc. IN FACTORY

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.

TAX _____

TOTAL CHARGE 2168.65

DISCOUNT 516.86 IF PAID IN 30 DAYS

4651.69

BREG AXLINE

PRINTED NAME

SIGNATURE Mary Allen

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Work done by ALLIED should be under the immediate supervision of the CONTRACTOR.