

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 # 32787
Name: Kansas Natural Gas Operating, Inc.
Address: P. O. Box 815
City/State/Zip: Sublette, KS 67877
Purchaser: BP-Amoco
Operator Contact Person: Steve Lehning
Phone: (620) 675-8185
Contractor: Name: Border-Line Well Service
License: 7840
Wellsite Geologist: Ron Osterbuhr

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: Kansas Natural Gas, Inc.

Well Name: Sullivan 2 CG
Original Comp. Date: 12-21-71 Original Total Depth: 2819'
 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. _____

| | |
|-----------------------------------|--|
| 8-13-07 | 9-6-07 |
| Spud Date or Recompletion Date | Date Reached TD Completion Date or Recompletion Date |

API No. 15 - 067-20108-00-001
County: Grant
SE NW SE Sec. 12 Twp. 29 S. R. 38 East West
1370' feet from (S) N (circle one) Line of Section
1420' feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Sullivan Well #: 2CG
Field Name: Chase/Council Grove
Producing Formation: Chase/Council Grove
Elevation: Ground: 3033' Kelly Bushing: 3042'
Total Depth: 2819' Plug Back Total Depth: 2787'
Amount of Surface Pipe Set and Cemented at 645' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 2819'
feet depth to Surface w/ 850 sx cmt.

Drilling Fluid Management Plan OWWO KGR 3/10/08
(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: Steve Lehning
Title: Field Superintendent Date: 9-18-07
Subscribed and sworn to before me this 18th day of September,
2007
Notary Public: Kraig L Gross
Date Commission Expires: _____



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

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 21 2007
CONSERVATION DIVISION
WICHITA, KS

Operator Name: Kansas Natural Gas Operating, Inc. Lease Name: Sullivan Well #: 2CG
 Sec. 12 Twp. 29 S. R. 38 East West County: Grant

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 |
|--|---|

| 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 |
| Surface Pipe | 12 1/4" | 8 5/8" | 24# | 645' | Common | 500 | 10% Salt 3 % Cal Chloride |
| Production | 7 7/8" | 5 1/2" | 14# | 2819' | Common | 850 | 10% Salt 3 % Cal Chloride |
| | | | | | | | |

| 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 <i>(Amount and Kind of Material Used)</i> | |
|----------------|---|--|-------------------------------------|
| | | | Depth |
| Hugoton (4) | 2346'-2352', 2372'-2380', 2418'-2428 | Acid: Commingle-2400 gallons of | 15% FE |
| Panoma (2) | 2643'-2645', 2654'-2659', 2669'-2677' | | |
| | 2689'-2697', 2703'-2705', 2712'-2722' | | |
| | 2733'-2743' | Frac: Commingle-100,000# of 12/20 Sand | 665,000 SCF of 70% Quality Nitrogen |

| | | | | | |
|--|-----------|------------|---|---------------|---|
| TUBING RECORD | | Size | Set At | Packer At | Liner Run |
| | | 2 3/8" 8RD | 2765' | None | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr. 9-6-07 | | | Producing Method | | |
| | | | <input checked="" 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 |
| | | 140 | None | 0 | |

| | | |
|---|---|---|
| Disposition of Gas | METHOD OF COMPLETION | Production Interval |
| <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i> | <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input checked="" type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____ | Hugoton 2346' - 2428' Panoma 2643'-2743' |

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KANSAS CORPORATION COMMISSION

SEP 21 2007