

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 # 30076
Name: A & A PRODUCTION
Address: PO BOX 100
City/State/Zip: HILL CITY KS 67642
Purchaser: _____
Operator Contact Person: ANDY ANDERSON
Phone: (785) 421-6266
Contractor: Name: A & A PRODUCTION
License: 30076
Wellsite Geologist: RON NELSON

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: _____
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. _____
2-17-01 2-25-01 2-25-01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-22814-0000
County: GRAHAM
 - NW - NW - SW Sec. 24 Twp. 9 S. R. 24 East West
2310 feet from (S) N (circle one) Line of Section
350 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: COLLEGE Well #: C-1
Field Name: GLEN DALE SE
Producing Formation: _____
Elevation: Ground: 2477 Kelly Bushing: _____
Total Depth: 4080 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 224 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 *Per RFR 12/13/07*
(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.: _____

CONSERVATION DIVISION

RECEIVED
KANSAS CORPORATION COMMISSION
MARCH 2001

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: *Andy Anderson*
Title: Operator Date: 3-9-01
Subscribed and sworn to before me this 9th day of March,
2001
Notary Public: *Rita A. Anderson*
Date Commission Expires: January 21, 2004

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
RITA A. ANDERSON
Graham County Distribution
My App. Exp. 1-21-04



Operator Name: A & A PRODUCTION Lease Name: COLLEGE Well #: C-1
 Sec. 24 Twp. 9 S. R. 24 East West County: GRAHAM

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 checked="" type="checkbox"/> Yes <input 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: <u>none</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Top Anhydrite</td> <td>2123</td> <td>+ 360</td> </tr> <tr> <td>Base Anhydrite</td> <td>2158</td> <td>+ 325</td> </tr> <tr> <td>Neva</td> <td>3120</td> <td>- 637</td> </tr> <tr> <td>Topeka</td> <td>3566</td> <td>-1083</td> </tr> <tr> <td>Heebner</td> <td>3779</td> <td>-1296</td> </tr> <tr> <td>Toronto</td> <td>3803</td> <td>-1320</td> </tr> <tr> <td>L KC</td> <td>3819</td> <td>-1336</td> </tr> <tr> <td>B KC</td> <td>4050</td> <td>-1567</td> </tr> </tbody> </table>	Name	Top	Datum	Top Anhydrite	2123	+ 360	Base Anhydrite	2158	+ 325	Neva	3120	- 637	Topeka	3566	-1083	Heebner	3779	-1296	Toronto	3803	-1320	L KC	3819	-1336	B KC	4050	-1567
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CASING RECORD <input 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	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8	20	224	60/40 POZ Mix	145	3% CC 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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

 * ORIGINAL *

INVOICE

Invoice Number: 083467

Invoice Date: 02/17/01

Sold A & A Production
 To: P. O. Box 100
 Hill City, KS
 67642

Cust I.D.....: A&APro
 P.O. Number...: College C-1
 P.O. Date.....: 02/17/01

Due Date.: 03/19/01
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	87.00	SKS	6.3500	552.45	E
Pozmix	58.00	SKS	3.2500	188.50	E
Gel	3.00	SKS	9.5000	28.50	E
Chloride	5.00	SKS	28.0000	140.00	E
Handling	153.00	SKS	1.0500	160.65	E
Mileage (55)	55.00	MILE	6.1200	336.60	E
153 sks @\$.04 per sk per mi					
Surface	1.00	JOB	470.0000	470.00	E
Mileage pmp trk	55.00	MILE	3.0000	165.00	E
Plug	1.00	EACH	45.0000	45.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 208.67
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2086.70
 Tax.....: 0.00
 Payments: 0.00
 Total....: 2086.70

ALLIED CEMENTING CO., INC.

PO BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

ORIGINAL

 * INVOICE *

Invoice Number: 083490

Invoice Date: 02/25/01

Sold A & A Production
 To: P. O. Box 100
 Hill City, KS
 67642

Cust I.D.....: A&APro
 P.O. Number...: College C-1
 P.O. Date.....: 02/25/01

Due Date.: 03/27/01
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	114.00	SKS	6.3500	723.90	E
Pozmix	76.00	SKS	3.2500	247.00	E
Gel	10.00	SKS	9.5000	95.00	E
FloSeal	48.00	LBS	1.4000	67.20	E
Handling	200.00	SKS	1.0500	210.00	E
Mileage (57)	57.00	MILE	8.0000	456.00	E
200 sks @\$.04 per sk per mi					
Plug	1.00	JOB	580.0000	580.00	E
Mileage pmp trk	57.00	MILE	3.0000	171.00	E
Plug	1.00	EACH	23.0000	23.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 257.31
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2573.10
 Tax.....: 0.00
 Payments: 0.00
 Total....: 2573.10