

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 # 5399
Name: American Energies Corporation
Address: 155 North Market, Suite 710
City/State/Zip: Wichita, Kansas 67202
Purchaser: None
Operator Contact Person: Alan L. DeGood, President
Phone: (316) 263-5785
Contractor: Name: Mallard JV, Inc.
License: 4958
Wellsite Geologist: David Barker

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. _____
4/10/01 4/17/01 4/18/01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

KANSAS CORPORATION COMMISSION
MAY 25 2001

API No. 15 - 007-22648-0000
County: Barber
S/2 NW NE Sec. 4 Twp. 31S S. R. 10W East West
990 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: Kinsler Well #: A-1
Field Name: Wildcat

Producing Formation: Target Formation - Mississippi
Elevation: Ground: 1722 Kelly Bushing: 1727
Total Depth: 4565 Plug Back Total Depth: 4570'
Amount of Surface Pipe Set and Cemented at 6 jts 8 5/8" 20#
X 254' set @ Feet
Multiple Stage Cementing Collar Used? 261' with LJ Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

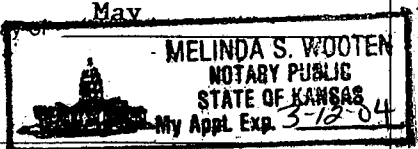
Drilling Fluid Management Plan *P&A RGR 1/11/08*
(Data must be collected from the Reserve Pit)
Chloride content 24,000 ppm Fluid volume 800bbls bbls
Deswatering method used Free fluids were removed
Location of fluid disposal if hauled offsite: _____
Operator Name: American Energies Corporation
Lease Name: Short A #1 SWD License No.: 5399
Quarter SE Sec. 12 Twp. 31S S. R. 8W East West
County: Harper Docket No.: D25-867

KANSAS CORPORATION COMMISSION

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: Alan L. DeGood
Title: President Date: 5/21/01
Subscribed and sworn to before me this 21st day of May
19 2001
Notary Public: Melinda S. Wooten
Date Commission Expires: 3-12-04



KCC Office Use ONLY

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

Operator Name: **American Energies Corporation** Lease Name: **Kinsler** Well #: **A-1**
 Sec. **4** Twp. **31S** S. R. **10W** 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,
CDL, CNL

FORMATION	SAMPLE TOP	DATUM ELEV.	ELECTRIC LOG TOP	DATUM ELEV.
CHASE	1825	-98	1824	-97
ONAGA SHALE	2611	-884	2610	-883
WABAUNSEE	2666	-939	2664	-937
TARKIO	2808	-1081	2806	-1079
EMPORIA	2865	-1138	2862	-1135
HEEBNER SHALE	3597	-1870	3592	-1865
UP DOUGLAS SQ.	3637	-1910	3636	-1909
LWR DOUGLAS SD.	3741	-2014	3735	-2008
BRN LM.	3815	-2088	3812	-2085
STARK SHALE	4189	-2462	4187	-2460
HUSHPUCKNEY SHALE	4223	-2496	4219	-2493
MARMATON	4292	-2565	4286	-2559
CHEROKEE SHALE	4412	-2685	4405	-2678
MISSISSIPPIAN	4419	-2692	4417	-2690
KINDERHOOK SHALE	4523	-2796	4518	-2791

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	# Sacs Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	20#	261' w/LJ	225 sx 60/40 poz 3% CC.		with 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

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 Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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 _____

EMENTING CO., INC.

SEL KS 67665
P (785) 483-3887
FAX (785) 483-5566

MW

* I N V O I C E *

Invoice Number: 084037

Invoice Date: 04/17/01

Sold American Energies Corp.
To: 155 N. Market #710
Moriah, KS
67222

API 15-007-2248-00-00

Cust I.D.....: Am Eng
P.O. Number...: Kinsler A-1
P.O. Date.....: 04/17/01

Due Date.: 05/17/01
Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	81.00	SKS	6.3500	514.35	E
Pozmix	54.00	SKS	3.2500	175.50	E
Gel	7.00	SKS	9.5000	66.50	E
Handling	142.00	SKS	1.0500	149.10	E
Mileage (20)	20.00	MILE	5.6800	113.60	E
142 sks @\$.04 per sk per mi					
Rotary Plug	1.00	JOB	470.0000	470.00	E
Mileage pmp trk	20.00	MILE	3.0000	60.00	E
Wooden plug	1.00	EACH	23.0000	23.00	E

All Prices Are Net, Payable 30 Days Following	Subtotal:	1572.05
Date of Invoice. 1 1/2% Charged Thereafter.	Tax.....:	0.00
If Account CURRENT take Discount of \$ <u>157.21</u>	Payments:	0.00
ONLY if paid within 30 days from Invoice Date	Total....:	1572.05

ALLIED CEMENTING CO., INC.

7507

Federal Tax I.D.#

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

SERVICE POINT:
MED Lodge

APR 15-007-27648-00-00

DATE <u>4-17-01</u>	SEC. <u>4</u>	TWP. <u>31S</u>	RANGE <u>10W</u>	CALLED OUT <u>4:00 pm</u>	ON LOCATION <u>6:30 p.m</u>	JOB START <u>6:45 pm</u>	JOB FINISH <u>8:30 p.m</u>
LEASE <u>Kinsler</u>		WELL # <u>A-1</u>	LOCATION <u>Ridge Rd. + Sharon Rd</u>		COUNTY <u>Barber</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)			<u>3/4 E to Quail Rd. 3/4 N. W/S</u>				

CONTRACTOR Mallard Dtg.
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8 T.D. 4565'
 CASING SIZE 8 5/8 DEPTH 261'
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH 600'
 TOOL DEPTH
 PRES. MAX 100 MINIMUM 25
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT

OWNER AMERICAN ENERGIES
 CEMENT
 AMOUNT ORDERED 135 sk 60:40:69 Gcl

EQUIPMENT
 PUMP TRUCK CEMENTER Shane Winsor
 # 356-302 HELPER David West
 BULK TRUCK
 # 258-239 DRIVER Scott Spriggs
 BULK TRUCK
 # DRIVER

COMMON	<u>81</u>	@	<u>6.35</u>	<u>514.35</u>
POZMIX	<u>54</u>	@	<u>3.25</u>	<u>175.50</u>
GEL	<u>7</u>	@	<u>9.50</u>	<u>66.50</u>
CHLORIDE		@		
		@		
		@		
		@		
		@		
HANDLING	<u>142</u>	@	<u>1.05</u>	<u>149.10</u>
MILEAGE	<u>142 x 20</u>		<u>.04</u>	<u>113.60</u>
				TOTAL <u>1019.05</u>

REMARKS:

600' pump 50 sk 100 psi
283' pump 50 sk 100 psi
40' pump 10 sk 25 psi
RH - pump 15 sk 25 psi
MH - pump 10 sk 25 psi

SERVICE

DEPTH OF JOB 600'
 PUMP TRUCK CHARGE 470.00
 EXTRA FOOTAGE @
 MILEAGE 20 @ 3.00 60.00
 PLUG WOODEN 8 5/8" @ 23.00 23.00
 @
 @
 TOTAL 553.00

CHARGE TO: AMERICAN ENERGIES
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

@ _____
 @ _____
 @ _____
 @ _____
 @ _____
 TOTAL _____

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 1572.05
 DISCOUNT 157.25 IF PAID IN 30 DAYS
1004.80
Kyle Juergensen
 PRINTED NAME

SIGNATURE Kyle Juergensen

(785) 483-3887
 FAX (785) 483-5566

*
 * I N V O I C E *
 *

Invoice Number: 083886

Invoice Date: 04/10/01

Sold American Energies Corp.
 To: 155 N. Market #710
 Wichita, KS
 67202

ENTD APR 17 2001

APS 15-207-22648-00-00

Cust I.D.....: Am Eng
 P.O. Number..: Kinscer A-1
 P.O. Date.....: 04/10/01

Due Date.: 05/10/01
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
common	135.00	SKS	6.3500	857.25	E
Pozmix	90.00	SKS	3.2500	292.50	E
Gel	4.00	SKS	9.5000	38.00	E
Chloride	7.00	SKS	28.0000	196.00	E
Handling	236.00	SKS	1.0500	247.80	E
Mileage (20)	20.00	MILE	9.4400	188.80	E
236 sks @\$.04 per sk per mi					
Surface	1.00	JOB	470.0000	470.00	E
Mileage pmp trk	20.00	MILE	3.0000	60.00	E
TWP	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 \$ 239.54
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2395.35
 Tax.....: 0.00
 Payments: 0.00
 Total....: 2395.35

(2395.35)
2155.81

21-26

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

SERVICE POINT: MED Lodge

APR 15 007 22648 00 00

DATE <u>4-10-01</u>	SEC <u>4</u>	TWP. <u>31s</u>	RANGE <u>10W</u>	CALLED OUT <u>8:00 P.M.</u>	ON LOCATION <u>9:35</u>	JOB START <u>11:25</u>	JOB FINISH <u>12:15</u>
LEASEE <u>KINSCER</u>	WELL # <u>A-1</u>	LOCATION <u>Ridge Rd & Shaden Rd 3/4 E</u>			COUNTY <u>Barber</u>	STATE <u>Ks</u>	
OLD OR <u>(NEW)</u> (Circle one)		to <u>Quail Rd 3/4 W W/S.</u>					

CONTRACTOR Mallard Dalg
 TYPE OF JOB Surface Pipe
 HOLE SIZE 12-4 T.D. 261
 CASING SIZE 8 5/8 20' DEPTH 261
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 20 ft.
 PERFS. _____
 DISPLACEMENT 15 1/2 bbls
 EQUIPMENT _____
 PUMP TRUCK CEMENTER Larry Storm
 # 359-265 HELPER MPK Rucker
 BULK TRUCK _____
 # 259-314 DRIVER David F.
 BULK TRUCK _____
 # _____ DRIVER _____

OWNER American Energies
 CEMENT
 AMOUNT ORDERED 225 sks 60/40 = 2 + 3% CACL2
 COMMON 135 @ 6.35 857.25
 POZMIX 90 @ 3.25 292.50
 GEL 4 @ 9.50 38.00
 CHLORIDE 7 @ 28.00 196.00
 _____ @ _____ _____
 _____ @ _____ _____
 _____ @ _____ _____
 HANDLING 236 @ 1.05 247.80
 MILEAGE 20 x 2.36 .04 188.80
 TOTAL 1820.35

REMARKS:

Brook Circulator Pow Rotary Mud
Switch over M.V. 50 20' sks
60/40 12 + 3% CACL2 - switched
and released plug - displaced
15 1/2 bbls fresh water, circulated
Cement to Surface.

SERVICE

DEPTH OF JOB 261'
 PUMP TRUCK CHARGE _____ 470.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 20 @ 3.00 60.00
 PLUG 1-8 5/8 TWP @ 45.00 45.00
 _____ @ _____
 _____ @ _____
 TOTAL 575.00

CHARGE TO: American Energies
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

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 2395.35
 DISCOUNT 239.94 IF PAID IN 30 DAYS
2155.41
Kirk Urban
 PRINTED NAME

SIGNATURE Kirk Urban