

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1995
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 31302
Name: Jones & Buck Development
Address: P.O. Box 68
City/State/Zip: Sedan, KS 67361
Purchaser: Quest Energy
Operator Contact Person: P.J. Buck
Phone: (620) 725-3636
Contractor: Name: McPherson Drilling
License: 5495
Wellsite Geologist: Thomas H. Oast

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. _____

2-07-01 2-21-01 03-26-01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 019-26552-0000

County: Chautauqua

SW SE SW Sec. 31 Twp. 33 S. R. 12 East West

350 feet from S / N (circle one) Line of Section

3650 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Short Well #: JBD-Denman I

Field Name: Sedan/Peru

Producing Formation: Mississippi

Elevation: Ground: 920 Kelly Bushing: 925

Total Depth: 1748 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 40 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1742

feet depth to Surface w/ 210 sx cmt.

Drilling Fluid Management Plan UFI II KJR 1/03/08
(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: Thomas H. Oast

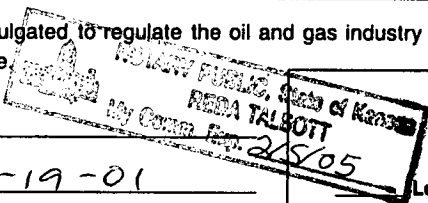
Title: AGEND/Geologist Date: 4-19-01

Subscribed and sworn to before me this 19th day of April

2001

Notary Public: Reda Talbott

Date Commission Expires: 2/5/2005



KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Jones & Buck Development Lease Name: Short Well #: JBD-Denman 1
 Sec. 31 Twp. 33 S. R. 12 East West County: Chautauqua

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 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Gamma Ray/Neutron Cement Bond	<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>Lenapah Limestone</td> <td>1090</td> <td>-170</td> </tr> <tr> <td>Wayside Sandstone</td> <td>1102</td> <td>-182</td> </tr> <tr> <td>Altamont Limestone</td> <td>1162</td> <td>-242</td> </tr> <tr> <td>Weiser Sandstone</td> <td>1195</td> <td>-275</td> </tr> <tr> <td>Pawnee Limestone</td> <td>1292</td> <td>-372</td> </tr> <tr> <td>Oswego Limestone</td> <td>1366</td> <td>-446</td> </tr> <tr> <td>Mulky Coal</td> <td>1421</td> <td>-501</td> </tr> <tr> <td>Mississippi Limestone</td> <td>1745</td> <td>-825</td> </tr> </tbody> </table>	Name	Top	Datum	Lenapah Limestone	1090	-170	Wayside Sandstone	1102	-182	Altamont Limestone	1162	-242	Weiser Sandstone	1195	-275	Pawnee Limestone	1292	-372	Oswego Limestone	1366	-446	Mulky Coal	1421	-501	Mississippi Limestone	1745	-825
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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
Surface	10 5/8	8 5/8		40'	Portland	6	
Production	6 3/4	4 1/2	9.5	1750	50/50 Poz	210	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
	Open Hole Completion		
	1749 - 1773		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr.	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
	0	10	trace		

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 _____

ACKERMAN HARDWARE and LUMBER CO
 160 EAST MAIN STREET
 SEDAN, KS 67361

ORIGINAL

PHONE: (316) 725-3103

THANKS FOR YOUR BUSINESS!!

15-019-26552-0000

CUSTOMER NO.	JOB NO.	PURCHASE ORDER NO.	REFERENCE	TERMS	CLERK	DATE	TIME
253636				NET 10TH	SC	2/ 7/01	9:25

S
O
L
D

T
O

JONES & BUCK DEVELOPMENT
 P. O. BOX 68

 SEDAN KS 67361

S
H
I
P

T
O

*Short
Lease*

DOCH 37504

 * INVOICE *

TAX : 001 KANSAS SALES TAX

SHIPPED	ORDERED	UM	SKU	DESCRIPTION	UNITS	PRICE/PER	EXTENSION
6		EA	N144816	PORTLAND CEMENT 94#	6	7.30 /EA	43.80
** AMOUNT CHARGED TO STORE ACCOUNT **						46.60	TAXABLE 43.80

NON-TAXABLE 0.00
 SUBTOTAL 43.80

X P J

RECEIVED BY

TAX AMOUNT 2.80
 TOTAL AMOUNT 46.60

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 OR 800-467-8676

ORIGINAL TICKET NUMBER 16609

LOCATION Biville
 FOREMAN Harold Reed

TREATMENT REPORT

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
2-21-01	4291							
CHARGE TO <u>J. R. D.</u>				OWNER				
MAILING ADDRESS				OPERATOR				
CITY				CONTRACTOR				
STATE		ZIP CODE		DISTANCE TO LOCATION				
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

WELL DATA	
HOLE SIZE <u>6 7/8</u>	
TOTAL DEPTH	
CASING SIZE <u>4 1/2</u>	
CASING DEPTH <u>1242</u>	
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	

TYPE OF TREATMENT	
<input type="checkbox"/> SURFACE PIPE	<input type="checkbox"/> ACID BREAKDOWN
<input checked="" type="checkbox"/> PRODUCTION CASING	<input type="checkbox"/> ACID STIMULATION
<input type="checkbox"/> SQUEEZE CEMENT	<input type="checkbox"/> ACID SPOTTING
<input type="checkbox"/> PLUG & ABANDON	<input type="checkbox"/> FRAC
<input type="checkbox"/> PLUG BACK	<input type="checkbox"/> FRAC + NITROGEN
<input type="checkbox"/> MISC PUMP	<input type="checkbox"/> FOAM FRAC
<input type="checkbox"/> OTHER	<input type="checkbox"/> NITROGEN

PRESSURE LIMITATIONS		
	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB

JOB SUMMARY

DESCRIPTION OF JOB EVENTS Got circulation ran 4 gal then 280 lbs 50/50 290 gal 5# gilsonite 590 gal 1/4 # flo. Drapped plug displaced to 1242. Set glue left 100# on casing

PRESSURE SUMMARY	
BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

TREATMENT RATE	
BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	

AUTHORIZATION TO PROCEED _____ TITLE _____ DATE _____



CONSOLIDATED

INDUSTRIAL SERVICES

AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
316-431-9210 OR 800-467-8676

TICKET NUMBER **17499**

LOCATION Bar+rsu.11e

FIELD TICKET ORIGINAL

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
2-21-01	4291							
CHARGE TO <u>J. B. D.</u>				OWNER				
MAILING ADDRESS <u>P.O. Box 68</u>				OPERATOR				
CITY & STATE <u>Sedan, KS 67361</u>				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE <u>Production</u>		525.00
5402	1742'	Footage		226.46
		HYDRAULIC HORSE POWER		
1110	21 sks.	gilsonite		386.40
1111	500 #	salt		100.00
1118	8 sks.	gel		88.00
1107	2 sks.	flp-seal		70.50
1105	2 sks.	hulls		24.20
4401	1	4 1/2 plug		27.30
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
5502	3 hrs.	VACUUM TRUCKS		195.00
		FRAC SAND		
1124	210 sks.	CEMENT 50/50		1575.00
		NITROGEN	ton	124.93
5407	1	TON-MILES		175.00
ESTIMATED TOTAL				3517.79

NSCO #15087

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Harold Red

CUSTOMER or AGENT (PLEASE PRINT)

DATE 2 21 01

171161