

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 # 5663
Name: Hess Oil Company
Address: P. O. Box 1009
City/State/Zip: McPherson, KS 67460
Purchaser: _____
Operator Contact Person: Bryan Hess
Phone: (620) 241-4640
Contractor: Name: Mallard JV, Inc.
License: 4958
Wellsite Geologist: Thomas J. Funk

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. _____

| | | |
|-----------------------------------|-----------------|---|
| <u>11/27/07</u> | <u>12/5/07</u> | <u>12/6/07</u> |
| Spud Date or Recompletion Date | Date Reached TD | Completion Date or Recompletion Date |

API No. 15 - 007-23225-0000
County: Barber
Appx. E2 - W2 - W2 Sec. 5 Twp. 30 S. R. 15 East West
2550 feet from S / N (circle one) Line of Section
850 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Ranch Well #: 1
Field Name: _____

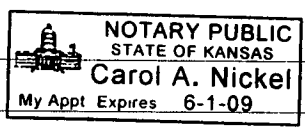
Producing Formation: _____
Elevation: Ground: 1978' Kelly Bushing: 1983'
Total Depth: 4844' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 429 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALTIUM
(Data must be collected from the Reserve Pit) 2-13-08
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Oil Producers Inc. of Kansas
Lease Name: Watson License No.: 8061
Quarter _____ Sec. 8 Twp. 29 S. R. 15 East West
County: Pratt Docket No.: D-24324

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: Bryan Hess
Title: Pres. Date: 1/24/08
Subscribed and sworn to before me this 24th day of January,
2008.
Notary Public: Carol A. Nickel
Date Commission Expires: _____



KCC Office Use ONLY

Letter of Confidentiality Received
If Denied, Yes Date: _____

Wireline Log Received
 Geologist Report Received

UIC Distribution

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JAN 25 2008
CONSERVATION DIVISION

Operator Name: Hess Oil Company Lease Name: Ranch Well #: 1
 Sec. 5 Twp. 30 S. R. 15 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input 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 (Submit Copy) 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 | 12-1/4" | 8-5/8" | 20# | 429' | 60/40 pozmix | 400 | 2% gel, 3% cc |
| | | | | | | | |
| | | | | | | | |

| 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, 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) | | |
| 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 (If vented, Submit ACO-18) | <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) | _____ _____ |

| | | |
|-------------------------------|-----------------------|-----------------------------------|
| Customer: HESS OIL CO. | Lease No.: | Date: 12-6-07 |
| Lease: RAUCH | Well #: 1 | |
| Field Order: 17754 | Station: PRATT | Casing: |
| Type Job: CNW P.T.A. | Formation: | Legal Description: S-30-15 |
| | Depth: | County: BARBER |
| | | State: KS |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | TREATMENT RESUME | | |
|-----------------|--------------|------------------|----|------------|------------------|-------|------------------|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP |
| Depth | Depth | From | To | Pre Pad | Max | | 5 Min. |
| Volume | Volume | From | To | Pad | Min | | 10 Min. |
| Max Press | Max Press | From | To | Frac | Avg | | 15 Min. |
| Well Connection | Annulus Vol. | From | To | | HHP Used | | Annulus Pressure |
| Plug Depth | Packer Depth | From | To | Flush | Gas Volume | | Total Load |

| | | |
|---|------------------------------------|---------------------------------|
| Customer Representative: | Station Manager: DAVE SCOTT | Treater: Robert Sullivan |
| Service Units: 19867 19841 19932 19860 | | |
| Driver Names: Sullivan Nelson Bales | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|---------|-----------------|-----------------|--------------|------|---|
| 0600 AM | | | | | on loc setting meeting |
| | | | | | Plug to Abandon w/ 145 sk ^{60'} / 40 |
| | | | | | 1 st plug 840' w/ 50sk |
| 0655 | 200 | | 10 | 4.5 | START SPACKER H ² O |
| | | | 13 | | Mix 50sk ^{60'} / 4002 |
| | | | 5 | 4 | DISP |
| 0705 | | | | | Shut down pull to next plug |
| | | | | | 2 nd plug @ 450' w/ 50 sk |
| 0745 | 200 | | 10 | 4.5 | START H ² O SPACKER |
| | | | 13 | | Mix cont 50sk |
| | | | 1 | 4 | DISP |
| 0755 | | | | | Shut down pull next plug |
| 0815 | | | 5 | | TAP 60' |
| 0825 | | | 7 | | Plug RH, MH |
| 0900 | | | | | Job Complete |

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WICHITA, KS

Thank you

BASIC

energy services, L.P.

TREATMENT REPORT

| | | |
|------------------------------------|-----------------------|-----------------------------------|
| Customer: <u>Hess Oil Co</u> | Lease No. | Date: <u>11-28-07</u> |
| Lease: <u>Ranch</u> | Well #: <u>1</u> | |
| Field Order #: <u>17487</u> | Station: <u>Pen-H</u> | Casing: <u>8 7/8</u> |
| Type Job: <u>CPW 8 7/8 SURFACE</u> | Formation | Legal Description: <u>5-30-15</u> |
| | Depth | County: <u>BARBER</u> |
| | | State: <u>KS</u> |

| PIPE DATA | | PERFORATING DATA | | FLUID USED | | TREATMENT RESUME | | |
|------------------------------|--------------|------------------|----|--------------------------|------------|------------------|------------------|--|
| Casing Size | Tubing Size | Shots/Ft | | Acid | RATE | PRESS | ISIP | |
| <u>8 7/8</u> | | | | <u>400 SK 6% 140 PCZ</u> | | | | |
| Depth: <u>429</u> | Depth | From | To | Pre Pad | Max | | 5 Min. | |
| Volume: <u>25</u> | Volume | From | To | Pad | Min | | 10 Min. | |
| Max Press: <u>500</u> | Max Press | From | To | Frac | Avg | | 15 Min. | |
| Well Connection: <u>P.C.</u> | Annulus Vol. | From | To | | HHP Used | | Annulus Pressure | |
| Plug Depth: <u>336.80</u> | Packer Depth | From | To | Flush | Gas Volume | | Total Load | |

| | | |
|-------------------------|------------------------------------|---------------------------------|
| Customer Representative | Station Manager: <u>DAVE SCOTT</u> | Treater: <u>Robert Sullivan</u> |
|-------------------------|------------------------------------|---------------------------------|

| | | | | | | | | | |
|---------------|-----------------|---------------|--------------|--------------|--|--|--|--|--|
| Service Units | <u>19867</u> | <u>19841</u> | <u>19960</u> | <u>19915</u> | | | | | |
| Driver Names | <u>Sullivan</u> | <u>Melton</u> | <u>Phye</u> | | | | | | |

| Time | Casing Pressure | Tubing Pressure | Bbls. Pumped | Rate | Service Log |
|-------------|-----------------|-----------------|--------------|------------|---|
| <u>0230</u> | | | | | on loc. Safety meeting |
| | | | | | Ran 10 JTS 8 7/8 20 casing with ONE BASKET @ 100' |
| | | | | | |
| <u>0520</u> | | | | | Hook Rip To Break circ Hook Track off |
| <u>0527</u> | <u>20.0</u> | | <u>10</u> | <u>4.5</u> | Shot H ₂ O SPACER |
| <u>0530</u> | | | | <u>5.5</u> | mix cont 400 SK 6% 140 PCZ @ 14.5 |
| | | | <u>90</u> | | Start down Ann Release Plug |
| <u>0550</u> | <u>300</u> | | | <u>5</u> | START Drip |
| <u>0600</u> | <u>600</u> | | <u>25</u> | <u>2.5</u> | Plug down |
| | | | | | Circ 1066L cont to Pit |
| <u>0630</u> | | | | | Job Complete |

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