

Oil & Gas Conservation Division  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

**ORIGINAL**

Operator: License 32406  
Name: Phoenix Kansas Energy, LLC.  
Address: 536 North Highland  
City/State/Zip: Chanute, Kansas 66720  
Purchaser: Plains Marketing  
Operator Contact Person: Bob Barnett  
Phone: (316) 431 - 2650  
Contractor: Name: A & A Well Service  
License: 31813  
Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion:

New Well     Re-Entry     Workover     Temp. Abd.  
 Oil     SWD     SIOW  
 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 TD: \_\_\_\_\_  
 Deepening  
 Plug Back     Plug Back Total Depth  
 Commingled    Docket No. \_\_\_\_\_  
 Dual Completion    Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No. \_\_\_\_\_

8/11/00    8/24/00    10/12/00  
Spud Date or    Date Reached TD    Completion Date or  
Recompletion Date    Recompletion Date

API No. 15 - 207 - 037-21490-0000  
County: Woodson CRAWFORD  
C - W2 - NE Sec. 30 Twp. 27 R 22 East  
3950 feet from S N (circle one) Line of Section  
1946 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one)    NE SE NW SW  
Lease Name: Albert Elmer Well # IX-5A  
Field Name: Hepler  
Producing Formation: Tucker  
Elevation: Ground NA Kelly Bushing: \_\_\_\_\_

Total Depth: 589' Plug Back TD: 589'  
Amount of Surface Pipe Set and Cemented: 21'  
Multiple Stage Cementing Collar Used?     Yes     No  
If yes, show depth set \_\_\_\_\_  
If Alternate II completion, cement circulated from 578'  
feet depth to Surface w/ 115 (to plug) sx. cmt.

**Drilling Fluid Management Plan**  
(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. \_\_\_\_\_

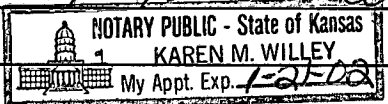
RECEIVED  
STATE CORPORATION COMMISSION  
NOV 7 2000  
Wichita, Kansas  
CONSERVATION DIVISION

**INSTRUCTIONS:** An original and two copies of this form shall be filled 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 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 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: Bob Barnett  
Title: Operations Manager Date: 11/16/00

Subscribed and sworn to before me this 16th day of November, 2000

Notary Public: Karen M. Willey  
Date Commission Expires: \_\_\_\_\_  


**KCC Office Use Only**  
 Letter of Confidentiality Attached  
 If denied, Yes  Date \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: Phoenix Kansas Energy, LLC. Lease Name: Albert Elmer Well # IX-5A

Sec. 30 Twp. 127 S R16 E  East  West

**Instructions:** Show important tops and base formations penetrated. Detail all cores. Report all final copies of drill stems test giving interval tested, time tool open and closed, flowing and shut-in pressures, wheather shut-in pressure reached static level, hydrostatic pressure, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with the chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wiring 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  List All E. Logs Run:	<input checked="" type="checkbox"/> Log      Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name                      Top                      Datum  <p style="text-align: center;"><b>See Attached Logs</b></p>
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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 Used	# Sacks Used	Types and Percent Additives
<b>Surface</b>	8"	5 1/2"		21'	Portland	4	
<b>Production</b>	4 3/4"	2 3/8"		578'	Portland	5 sxs.	
						on packer	

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
2	976'-980'	None	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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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
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Disposition of Gas	Method of Completion	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	<input type="checkbox"/> Other (Specify) _____