

15-051-25205-00-00

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 # 32511
Name: Imperial American Oil Corporation
Address: 303 N Carroll Blvd #214
City/State/Zip: Denton TX 76201
Purchaser: NCRA
Operator Contact Person: Hal Porter
Phone: (940) 483-9148
Contractor: Name: Murfin Drilling Company, Inc.
License: 30606
Wellsite Geologist: Randy Kilian

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. _____

<u>5/07/2003</u>	<u>5/14/2003</u>	<u>6/4/2003</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25,205-00-00
County: Ellis
SW NE NE Sec. 36 Twp. 11S S. R. 16 East West
1075 feet from S (N) (circle one) Line of Section
1031 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Myra Well #: 36-2
Field Name: Wildcat
Producing Formation: LKC
Elevation: Ground: 1751 Kelly Bushing: 1756
Total Depth: 3525 Plug Back Total Depth: 3493
Amount of Surface Pipe Set and Cemented at 932 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 11-1-03
(Data must be collected from the Reserve Pit)
Chloride content 59,000 ppm Fluid volume 400 bbls
Dewatering method used allowed to dry, backfilled
Location of fluid disposal if hauled offsite: RECEIVED
KANSAS CORPORATION COMMISSION
Operator Name: _____
Lease Name: _____ License No. 10-13-2003
Quarter _____ Sec. _____ Twp. _____ S. _____ East West
County: _____ Docket No.: WICHITA, KS

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: Hal Porter
Title: President Date: October 8, 2003

Subscribed and sworn to before me this 9th day of October, 2003.

Notary Public: Lisa A. Schmid
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: Imperial American Oil Corporation Lease Name: Myra Well #: 36-2
 Sec. 36 Twp. 11S S. R. 16 East West County: Ellis

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 checked="" type="checkbox"/> Yes <input 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: DI, Comp N-D, Micro, Sonic	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input checked="" type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Anhydrite</td> <td>914</td> <td>+842</td> </tr> <tr> <td>Topeka</td> <td>2683</td> <td>-927</td> </tr> <tr> <td>Toronto</td> <td>2950</td> <td>-1194</td> </tr> <tr> <td>Lansing</td> <td>2984</td> <td>-1228</td> </tr> <tr> <td>Arbuckle</td> <td>3409</td> <td>-2653</td> </tr> </table>	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Anhydrite	914	+842	Topeka	2683	-927	Toronto	2950	-1194	Lansing	2984	-1228	Arbuckle	3409	-2653
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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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8'	24	932	60/40 Poz	425	3%Cacl, 2%gel
Production	7-7/8"	5-1/2"	15.5	3512	ASC	225	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
4	3194-98; 3172-76; 3140-47; 2952-58; 2712-16;	250 gal 15% MCA each set of perfs	
		RECEIVED KANSAS CORPORATION COMMISSION OCT 13 2003	
		CONSERVATION DIVISION WICHITA, KS	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2-3/8"	3222	None			
Date of First, Resumerd Production, SWD or Enhr.			Producing Method				
6/5/2003			<input type="checkbox"/> Flowing <input checked="" 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		
	85	nil	10	nil	34		

Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval Other (Specify) _____

ORIGINAL ALLIED CEMENTING CO., INC. 14715

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

15-051-25205-00-00

SERVICE POINT:

Russell

DATE <u>5/14/03</u>	SEC. <u>36</u>	TWP. <u>17</u>	RANGE <u>16</u>	CALLED OUT <u>NOON</u>	ON LOCATION <u>4:00pm</u>	JOB START	JOB FINISH <u>7:30pm</u>
LEASE <u>M/169</u>		WELL # <u>36-2</u>		LOCATION <u>Fairport 100 2w</u>		COUNTY <u>Ellis</u>	STATE <u>Ks</u>
OLD OR NEW (Circle one) <u>NEW</u>				RECEIVED			

CONTRACTOR MURFIN #16

TYPE OF JOB 82 Prod String

HOLE SIZE 7 7/8 T.D. 3525

CASING SIZE 5 1/2 DEPTH 35

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 44.96

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT AMOUNT ORDERED

KANSAS CORPORATION COMMISSION
10-13-2003
OCT 13 2003

CONSERVATION DIVISION
WICHITA, KS

225' ASC 2% Gel

500 gal WFR²

COMMON	225 ASC	@	9 ⁰⁰	2025 ⁰⁰
POZMIX		@		
GEL	4	@	10 ⁰⁰	40 ⁰⁰
CHLORIDE		@		
WFR-2	500 gals	@	1 ⁰⁰	500 ⁰⁰
		@		
		@		
		@		
		@		
HANDLING	225	@	HE	258 ⁷⁵
MILEAGE	54 1/2	/MILE		281 ²⁵
				TOTAL 3105 ⁰⁰

EQUIPMENT

PUMP TRUCK # <u>177</u>	CEMENTER <u>BEV</u>	HELPER <u>RON</u>
BULK TRUCK # <u>213</u>	DRIVER <u>Glen</u>	
BULK TRUCK # _____	DRIVER _____	

REMARKS:

pipe at 3424
Shoe pt. 44.96
Insert 3473
pump 500 gal WFR² cement @ 2%
also ASC pump plus w/ 85 bbls
land loss 1106# float did hold
15.5 hr RH.
10 hr m.

SERVICE

DEPTH OF JOB _____		
PUMP TRUCK CHARGE _____		1130 ⁰⁰
EXTRA FOOTAGE _____	@	
MILEAGE <u>25</u>	@	35 ⁰⁰ 875 ⁰⁰
PLUG <u>1- 5/8 Rubber</u>	@	50 ⁰⁰
	@	
	@	
		TOTAL 1267 ⁵⁰

CHARGE TO: Imperial American Oil Co

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1- Insert	@	235 ⁰⁰
8- Centralizers	@	40 ⁰⁰ 320 ⁰⁰
2- Screeners Respiro.	@	35 ⁰⁰ 735 ⁰⁰
1- Guide shoe	@	150 ⁰⁰
	@	
		TOTAL 1440 ⁰⁰

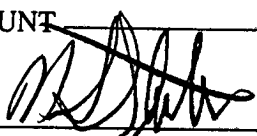
To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE _____


PRINTED NAME

Thanks Ron!!!

ALLIED CEMENTING CO., INC. 14709

ORIGINAL
14709

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

15-051-25205-00-00

SERVICE POINT:
Russell

DATE <u>5/08/03</u>	SEC. <u>36</u>	TWP. <u>11</u>	RANGE <u>16</u>	CALLED OUT <u>NOON</u>	ON LOCATION <u>1:45 PM</u>	JOB START	JOB FINISH <u>4:15 PM</u>
LEASE <u>MYR 9</u>		WELL # <u>38-2</u>		LOCATION <u>Fairport 1W 2N</u>		COUNTY <u>Ellis</u>	STATE <u>Kan</u>
OLD OR NEW (Circle one)						RECEIVED KANSAS CORPORATION COMMISSION <u>10-13-2003</u> OCT 13 2003	

CONTRACTOR MURFIN DRlg #16

TYPE OF JOB SURFACE

HOLE SIZE 12 1/2 T.D. 933

CASING SIZE 8 3/8 DEPTH 932

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15

PERFS. _____

DISPLACEMENT 58 1/2

OWNER _____

CEMENT AMOUNT ORDERED _____

CONSERVATION DIVISION
WICHITA, KS

42 Sub 60/40 po2 3% CC 2% bel

COMMON	<u>255</u>	@	<u>7.15</u>	<u>1823.25</u>
POZMIX	<u>170</u>	@	<u>3.80</u>	<u>646.00</u>
GEL	<u>8</u>	@	<u>10.00</u>	<u>80.00</u>
CHLORIDE	<u>18</u>	@	<u>21.67</u>	<u>390.06</u>
_____		@		
_____		@		
_____		@		
_____		@		
_____		@		
HANDLING	<u>425</u>	@	<u>1.15</u>	<u>488.75</u>
MILEAGE	<u>54.5K/mile</u>			<u>531.25</u>
TOTAL				<u>3959.25</u>

EQUIPMENT

PUMP TRUCK CEMENTER Bill

345 HELPER Dave

BULK TRUCK

213 DRIVER Glen

BULK TRUCK

282 DRIVER Brent

REMARKS:

RAN 2 1/2 hrs of 8 3/8 set c 932.

Cemt w/ 425 lbs of cemt.

pump plug w/ 58 1/2 bbls of water

Cemt. did circ ✓

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 630.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 25 @ 35.00 875.00

PLUG 1 8 3/8 Rubbee Plug @ _____ 100.00

_____ @ _____

_____ @ _____

TOTAL 817.00

CHARGE TO: Imperial America

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1-8 3/8 Baffle plate @ _____ 45.00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Bill Wynne

Bill Wynne
PRINTED NAME

THANKS