

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 073-238930000

County Greenwood

NW NW SE Sec. 14 Twp. 23 Rge. 10 E W

198 2178 Feet from S (circle one) Line of Section

198 2178 Feet from E (circle one) Line of Section

Footages calculated from Nearest Outside Section Corner:
NE, SE NW or SW (circle one)

Lease Name Vigle Well # 11

Field Name Burkett

Producing Formation Bartlesville

Elevation: Ground _____ KB 1285

Total Depth 2175 PBDT _____

Amount of Surface Pipe Set and Cemented at 208 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, _____ depth set _____ Feet

Altitude of II completion, cement circulated from 208 feet depth to 0 w/ 110 sx cat.

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) Alt I KGR 1/11/08
Amended

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W _____

County _____ Docket No. _____

Operator: License # 5930

Name: Franklin D. Gaines

Address P.O. Box 219

City/State/Zip Augusta, KS 67010

Purchaser: Plains

Operator Contact Person: Earl Brothers

Phone (620-) 678-3493

Contractor: Name: C & G Drilling

License: 32701

Wellsite Geologist: Bill Stout

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD S10W Temp. AB
 Gas ENHR S1GW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

CONSERVATION DIVISION

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JUN 12 2001

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back _____ PBDT _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) Docket No. _____

8/25/00 8/29/00 4/18/01
Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 Dorothy Hubbard

Title Agent for Operator Date 5/29/01

Subscribed and sworn to before me this 29th day of May.

Notary Public Blenda Maier

Date Commission Expires _____

BRENDA MAIER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 12/14/03

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

Operator Name Franklin D. Gaines Lease Name Vigle Well # 11
 Sec. 14 Twp. 12 Rge. 10 East County Greenwood
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Bartlesville 2102' 2120'
 geological report sent with delayed completion report

CASING RECORD New 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	24	208	Reg Class A	110	3% Caclz
Longstring	7-7/8	5 1/2	15.5	2175	60/40 Poz	175	2% gel
cement tickets sent with delayed completion report							

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
	2102-2120 10 shots	250 gal acid	
	3 1/2 strip	270 sx sand	
		500 bbl water brine	

TUBING RECORD Size 2-3/8" Set At 2108 Packer At no Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 4/20/01 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil 8 Bbls.	Gas Mcf	Water 80 Bbls.	Gas-Oil Ratio 1%	Gravity 40
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Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

ORIGINAL

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5930
Name: Franklin D. Gaines
Address P.O. Box 219
Augusta, KS 67010
City/State/Zip _____

Purchaser: Plains

Operator Contact Person: Earl Brothers

Phone (316) 678-3493

Contractor: Name: C & G Drilling

License: _____

Wellsite Geologist: Bill Stout

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

8/25/00 8/29/00 delayed compl
Spud Date Date Reached TD Completion Date

API NO. 15- 073-238930000

County Greenwood

-NW - NW - SE Sec. 14 Twp. 23 Rge. 10 E W

198 Feet from S N (circle one) Line of Section

198 Feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Vigle Well # 11

Field Name Burkett

Producing Formation Bartlesville

Elevation: Ground _____ KB 1285

Total Depth 2175 PBDT _____

Amount of Surface Pipe Set and Cemented at 208 Feet

Multistage Cementing Collar Used? Yes No

If Yes, show depth set 208 Feet

If Alternate II completion, cement circulated from _____

feet depth to 110 w/ 110 sx cmt.

Drilling Fluid Management Plan see I RGR 1/11/08
(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 Rng. E/W

County _____ Docket No. _____

CONSERVATION DIVISION

JAN 24 2001

RECEIVED
KANSAS CORPORATION COMMISSION

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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 Dorothy L. Hubbard

Title Agent for Operator Date 1/22/01

Subscribed and sworn to before me this 22 day of January, 2001.

Notary Public Brenda Maier

Date Commission Expires _____

BRENDA MAIER
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 12-14-2003

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
____ KCC _____ SWD/Rep _____ NGPA
____ KCS _____ Plug _____ Other
(Specify)

Operator Name Franklin D. Gaines

Lease Name Vigle

Well # 11

Sec. 14 Twp. 23 Rge. 10

East

County Greenwood

West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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.)

Log Formation (Top), Depth and Datums Sample
Name Top Datum

see attached Geological Report

List All E.Logs Run:

CASING RECORD

New 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	24	208	Reg Class A	110	3% CacIz
Longstring	7-7/8	5 1/2	15.5	2175	60/40 Poz	175	2% gel
copy of cementing tickets attached							

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
	delayed		delayed	

TUBING RECORD	Size	Set At	Packer At	Liner Run
delayed				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj.	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:

Vented Sold Used on Lease
(If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

Production Interval _____

ORIGINAL

BLUE STAR
ACID SERVICE, INC.

PO Box 103
Eureka, Kansas 67045

Cementing Ticket
and Invoice Number

No. 2356

Date 8-29-00	Customer Order No.	Sect. 14	Twp. 23S	Range 10E	Truck Called Out 5:30 ^{am}	On Location 6:30 ^{am}	Job Began 8:30 ^{pm}	Job Completed 9:15 ^{pm}
Owner FRANKLIN D. GAINES		Contractor C E G Drig.			Charge To FRANKLIN D. GAINES			
Mailing Address P.O. Box 219		City Augusta			State KS 67010			
Well No. & Form Vigle # 11		Place		County Greenwood		State KS		
Depth of Well 2179'	Depth of Job 2179'	Casing (New) (Used)	Size 5 1/2	Weight 15.50	Size of Hole 7 7/8	Amt. and Kind of Cement 175 sks	Cement Left in casing by	Request Necessity 0' feet
Kind of Job Longstring					Drillpipe	Tubing	(Rotary) (Cable)	Truck No. UNIT # 2

Price Reference No.	# 1
Price of Job	665.00
Second Stage	
Mileage	15.7 31.50
Other Charges	
Total Charges	696.50

Remarks Big up to 5 1/2 casing. Break circulation w/ 15 bbls fresh water. Mixed 175 sks 60/40 Pozmix 2% Gel. Shut down, wash out pump & lines. Release plug. Displace w/ 52 bbls fresh water. Final pumping pressure 500 PSI. Bump plug to 1000 PSI. Check float. Float held shut casing in @ 0 PSI. Good circulation while cementing.
Ban wire line tag plug @ 2186'

Cementer Kevin McCoy

Helper Brad - Mike

District Eureka

The above job was done under supervision of the owner, operator, or his agent whose signature appears below.

"Thank You"

x [Signature]

Agent of contractor or operator

Sales Ticket for Materials Only

Quantity Sacks	BRAND AND TYPE	PRICE	TOTAL
175 sks	60/40 Pozmix	5.50	962.50
300 *	Gel 2% Allowed	N.C.	N.C.
10 sks	RAF Hole	5.50	55.00
1	5 1/2 Top Rubber Plug	40.00	40.00
	185 sks Handling & Dumping	.50	92.50
	7.95 TONS Mileage 15	.70	83.47
	Sub Total		1929.97
	Discount		
	Sales Tax	5.9%	113.87
	Total		2,043.84

Delivered by Truck No. # 4

Delivered from Eureka

Signature of operator Kevin McCoy