

KANSAS CORPORATION COMMISSION
OIL & GAS DIVISION

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Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

KCC WICHITA ORIGINAL

Operator: License # 32471
Name: Sublette Oil Corporation
Address: P.O. Box 3726
City/State/Zip: Ft. Smith, Arkansas 72913-3726
Purchaser: _____
Operator Contact Person: Kent Crisler
Phone: (316) 620 326-1932
Contractor: Name: Summit Drilling
License: 30141
Wellsite Geologist: Kent Crisler

API NO. 15 - 191-22418-00-00
County: Sumner
SW SE - SE - 5 Sec. 31 S. R. 1 East West
400 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: Jewell Well #: 1-5
Field Name: Unnamed

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Producing Formation: Mississippian
Elevation: Ground: 1283 Kelly Bushing: 1293
Total Depth: 3690 Plug Back Total Depth: 3690
Amount of Surface Pipe Set and Cemented at 422' set @ 434' 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.

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. _____
10/7/2003 10/15/03 10/15/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Drilling Fluid Management Plan *COI RGR 2/8/08*
(Data must be collected from the Reserve Pit)
Chloride content 8000 ppm Fluid volume 150 bbls
Dewatering method used Evaporation
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 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: Kent Crisler
Title: Kent Crisler Date: 7/1/2004

Subscribed and sworn to before me this 1st day of July, 2004

Notary Public: Melinda S. Wooten
Date Commission Expires: Melinda S. Wooten, Notary Exp. 3/12/08

MELINDA S. WOOTEN
My Appt. Exp. 3-12-08

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 UIC Distribution

Operator Name: American Energies Corporation Lease Name: Jewel Well: 1-5
Sec. 5 Twp. 31 S. R. 1 Vest County: Sumner

INSTRUCTIONS: Show important tops and bas of formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval test, 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 charts(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline logs surveyed. Attach final geological well site report.

ORIGINAL

Drill Stem Tests Taken Yes No (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum Name Top	<input type="checkbox"/> Sample Datum
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Kansas City	3002 -1709
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mississippi	3648 -2355
Electric Log Run Yes No (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	TD	3690 -2397
List All E. Logs Run: DIL and CNL Density, Bond Log		KB 1293	

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KCC WICHITA

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#	422'	Class 1	125	3% CC, 2% gel
Production	7 7/8"	4 1/2"	1.05#	3688'	ASC	150 sx	5# SOC

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
2 SPF	3663-3674	Frac 31, 611# sand + 737 bbls fluid	3663-74

TUBING RECORD	Size 2 3/8"	Set At 3672'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method <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 7	Gas Mcf None	Water Bbls 20	Gas-Oil Ratio 43 Gravity

Disposition of Gas Vented Open Hole Other Specify _____

METHOD OF COMPLETION Open Hole Dually Comp. Commingled _____

Production Interval _____

(If vented, Sumit ACO-18.)

ALLIED CEMENTING CO., INC. 15259

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

SERVICE POINT: Medicineville

DATE <u>10/8/03</u>	SEC. <u>5</u>	TWP. <u>3/S</u>	RANGE <u>1W</u>	CALLED OUT <u>12:30 AM</u>	ON LOCATION <u>3:30 AM</u>	JOB START <u>10:00 AM</u>	JOB FINISH <u>10:30 AM</u>
LEASE <u>Jewel</u>		WELL # <u>1-5</u>	LOCATION <u>Conway Springs</u>			COUNTY <u>Sumner</u>	STATE <u>KS</u>
OLD OR <u>NEW</u> (Circle one)			<u>10E 1E 3/4E 4. into</u>				

CONTRACTOR Summit Oil Co OWNER SUBLETTE OIL CO.

TYPE OF JOB S.A. Face

HOLE SIZE <u>12 1/4</u>	T.D. <u>430</u>
CASING SIZE <u>8 1/2</u>	DEPTH <u>422</u>
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2</u>	DEPTH <u>430</u>
TOOL	DEPTH
PRES. MAX <u>200 PSI</u>	MINIMUM
MEAS. LINE	SHOE JOINT <u>40 FT</u>
CEMENT LEFT IN CSG. <u>40 FT</u>	
PERFS.	
DISPLACEMENT <u>FRESH WATER 25 BPS</u>	

CEMENT
AMOUNT ORDERED 1256x1.5 35.6T
3% cement 1/4" F/c Seal 100.5x A
3% cement + 2% Bel

COMMON	@	
POZMIX	@	
GEL	@	
CHLORIDE	@	
	@	RECEIVED
	@	JUL 09 2004
	@	KCC WICHITA
	@	
HANDLING	@	
MILEAGE	@	

EQUIPMENT

PUMP TRUCK # <u>302</u>	CEMENTER <u>David W</u>
	HELPER <u>Dwight A</u>
BULK TRUCK # <u>356</u>	DRIVER <u>B. H. M.</u>
BULK TRUCK #	DRIVER

TOTAL _____

REMARKS:

SERVICE

DD ON Bottom Break side
Pump 1256x lead cement
Pump 1256x Tail cement
Release Plug Displacement
Fresh Water Slow Rate
Bump Plug Float Did Hold
Cement Displacement

DEPTH OF JOB <u>422</u>	
PUMP TRUCK CHARGE	
EXTRA FOOTAGE	@
MILEAGE	@
PLUG <u>R.B.B-D</u>	@
	@
	@

CHARGE TO: SUBLETTE OIL CO.

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>1-GRABER</u>	@	
<u>1-AFU TREST</u>	@	
<u>1-STOP PILE</u>	@	
<u>2-CENTRAL LBS.</u>	@	
<u>2-BASKETS</u>	@	

TOTAL _____

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 [Signature]

[Signature]
PRINTED NAME

ALLIED CEMENTING CO., INC. 12992

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

SERVICE POINT:
Mediam Lodge

DATE <u>10-16-03</u>	SEC. <u>5</u>	TWP. <u>31s</u>	RANGE <u>14w</u>	CALLED OUT <u>8:30 AM</u>	ON LOCATION <u>10:45 AM</u>	JOB START <u>4:40 PM</u>	JOB FINISH <u>5:00 AM</u>
LEASE <u>10-16-03</u>		WELL# <u>1-5</u>		LOCATION <u>Conway Springs</u>		COUNTY <u>Sumner</u>	STATE <u>K</u>
OLD OR NEW (Circle one)			10 2 1/2, 15, 3/4, 1/5				

CONTRACTOR Summit Drilling
 TYPE OF JOB production
 HOLE SIZE 7 7/8 T.D. 3680
 CASING SIZE 4 1/2 x 10.5 DEPTH 3180
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 1100 MINIMUM 300
 MEAS. LINE _____ SHOE JOINT 45'
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 59 Bbls 2/1 KCL water

OWNER Sollette Oil Co
CEMENT
 AMOUNT ORDERED _____
150 sq ASC + 5' Kel seal
500 Gal Mid-clean (Gal: Clapre
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
150 sq ASC @ 9.00 1350.00
750' Kel seal @ .50 375.00
6 Gal Clapre @ 22.90 137.40
50 Gal Mid-clean @ .75 37.50
 HANDLING 195 @ 1.15 221.95
 MILEAGE 60 x 60 x 1.75 5x 579.00

EQUIPMENT

PUMP TRUCK CEMENTER Carl Palding
 # 372 HELPER Mark Pungardt
 BULK TRUCK _____
 # 304 DRIVER Bill Mackadoo
 BULK TRUCK _____
 # _____ DRIVER _____

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KCC WICHITA SERVICE
 TOTAL 3038.35

REMARKS:

Run casing break circulation, Temp 200
Gal Mid-clean, mix 150 sq ASC + 5'
Kel seal, wash Pump + lines, Release plug
+ Displace with 59 Bbls 2/1 KCL water.
Pumps plug + Free Hold

DEPTH OF JOB 3680
 PUMP TRUCK CHARGE _____ 1150.00
 EXTRA FOOTAGE _____ @ _____
 MILEAGE 60 @ 3.50 210.00
 PLUG Rubber @ _____ 45.00
 _____ @ _____
 _____ @ _____
 TOTAL 1398.00

CHARGE TO: Sollette Oil Co.
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

1 Reg Guide 5/16 @ _____ 125.00
1 New Flat collar @ _____ 245.00
1 Stop Ring @ _____ 20.00
3 Centalizers @ 45.00 135.00
 _____ @ _____
 TOTAL 525.00

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 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 4951.35
 DISCOUNT 0 IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____