

ORIGINAL

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM

RECEIVED  
KANSAS CORPORATION COMMISSION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL HISTORY - DESCRIPTION OF WELL & LEASE JAN 24 2005

Operator: License # 6569  
Name: Carmen Schmitt, Inc.  
Address: PO Box 47  
City/State/Zip: Great Bend, Kansas 67530  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Jacob Porter  
Phone: (620) 793-5100  
Contractor: Name: Shields Drilling Company  
License: 5184  
Wellsite Geologist: Rich O'Donnell

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. \_\_\_\_\_

11-01-03	11-12-03	11-13-03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 101-21825 ~~OPERATION DIVISION~~  
County: Lane ~~WICHITA, KS~~  
w/2\_w/2\_sw\_nw Sec. 13 Twp. 16 S. R. 28  East  West  
1930' FNL feet from S / N (circle one) Line of Section  
~~150'~~ FWL 140' feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Mildred Unit Well #: 1  
Field Name: Bison cliffs  
Producing Formation: \_\_\_\_\_  
Elevation: Ground: 2705 Kelly Bushing: 2710  
Total Depth: 4600 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 219 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 P+LA KGR 2/26/08  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used Evaporate and backfill  
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 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: Jacob L. Porter

Title: Engineer Date: 1/21/05

Subscribed and sworn to before me this 21st day of January,  
20 05.

Notary Public: Elaine Schack  
NOTARY PUBLIC - State of Kansas  
ELAINE SCHECK  
My Appt. Exp. 12-13-07

Date Commission Expires: 12-13-07

KCC Office Use ONLY

Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

JAN 24 2005

Side Two

Operator Name: Carmen Schmitt, Inc. Lease Name: Mildred Unit CONSERVATION DISTRICT # 1  
 Sec. 13 Twp. 16 S. R. 28  East  West County: Lane

**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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	2119	591
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Topeka	3660	-950
List All E. Logs Run:		Lansing	3945	-1235
		Base KC	4261	-1551
		Marmaton	4281	-1571
		Fort Scott	4442	-1732
		Mississippian	4542	-1832
Dual Induction, Density-Neutron, MicroRLog, Sonic				

CASING RECORD <input 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	12.25"	8.625"	23	219	70/30 pozmix	150	3% gel, 2% CaCl

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

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

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i>

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled \_\_\_\_\_  
*(If vented, Submit ACO-18.)*  Other *(Specify)* \_\_\_\_\_

# ALLIED CEMENTING CO. INC.

7921

RECEIVED  
KANSAS CORPORATION COMMISSION

JAN 24 2005

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

SERVICE POINT: Neosho City

CONSERVATION DIVISION  
WICHITA, KS

DATE <u>11-1-03</u>	SEC. <u>13</u>	TWP. <u>16</u>	RANGE <u>28</u>	CALLED OUT <u>3:30pm</u>	ON LOCATION <u>8:15pm</u>	JOB START <u>11:15pm</u>	JOB FINISH <u>11:45pm</u>
LEASE <u>Meldred Unit</u>	WELL# <u>1</u>	LOCATION <u>Pandemonis 2W 2 1/2 S E+S</u>			COUNTY <u>Lane</u>	STATE <u>KS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Shields Dring  
 TYPE OF JOB Surface  
 HOLE SIZE 12 1/4 T.D. 222  
 CASING SIZE 8 3/8 DEPTH 219  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_  
 CEMENT LEFT IN CSG. 15  
 PERFS. \_\_\_\_\_  
 DISPLACEMENT 13 1/4

EQUIPMENT

PUMP TRUCK CEMENTER J. Weighaus  
 # 224 HELPER \_\_\_\_\_  
 BULK TRUCK \_\_\_\_\_  
 # 260 DRIVER Don  
 BULK TRUCK \_\_\_\_\_  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 160 70/30 3%cc 2%del

COMMON	<u>112 lb</u>	@	<u>7.15</u>	<u>800.80</u>
POZMIX	<u>48 lb</u>	@	<u>3.80</u>	<u>182.40</u>
GEL	<u>3 gal</u>	@	<u>10.00</u>	<u>30.00</u>
CHLORIDE	<u>5 gal</u>	@	<u>3.00</u>	<u>15.00</u>
		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>168 lb</u>	@	<u>1.15</u>	<u>193.20</u>
MILEAGE	<u>40</u>	<u>168</u>	<u>05</u>	<u>336.00</u>
				TOTAL <u>1692.40</u>

REMARKS:

SERVICE

case 8 3/8 w/ rig Pump, mix  
160sx 70/30 3%cc 2%del, disp  
Plug w/ 13 1/4 BBL water  
cemt dead case

THANKS

DEPTH OF JOB 219  
 PUMP TRUCK CHARGE \_\_\_\_\_ 520.00  
 EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_  
 MILEAGE 40 @ 3.50 140.00  
 PLUG Topwood @ 45.00 45.00

TOTAL 705.00

CHARGE TO: Carmen Schmitt Inc.  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FLOAT EQUIPMENT

\_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_  
 @ \_\_\_\_\_

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 Burton Beery

Burton Beery  
 PRINTED NAME