

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

**ORIGINAL**

Operator: License # 5952

Name: BP AMERICA PRODUCTION COMPANY

Address P. O. BOX 3092, WL1, RM 3.201

City/State/Zip HOUSTON, TX 77253-3092

Purchaser: \_\_\_\_\_

Operator Contact Person: SUE SELLERS

Phone ( 281 ) 366-2052

Contractor: Name: CHEYENNE DRILLING

License: 5382

Wellsite Geologist: \_\_\_\_\_

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/Reentry: 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. \_\_\_\_\_

10/10/03 10/12/03 11/03/03

Spud Date or  Date Reached TD  Completion Date or  Recompletion Date

API NO. 15- 187-21013-0000

County STANTON

NE - NE - NE Sec. 20 Twp. 27 S. R. 39  E  W

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

330 E Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name NEFF, MINNIE Well # 4

Field Name HUGOTON

Producing Formation CHASE

Elevation: Ground 3171 Kelley Bushing 3178

Total Depth 2650' Plug Back Total Depth 2650'

Amount of Surface Pipe Set and Cemented at 745 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 OUT I RGR 2/5/08  
(Data must be collected from the Reserve Pit)

Chloride content 25,000 MG/L ppm Fluid volume 1000 bbls

Dewatering method used DRIED AND FILLED

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S R. \_\_\_\_\_  E  W

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 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 Sue Sellers

Title STAFF ASSISTANT Date 11/20/03

Subscribed and sworn to before me this 20TH day of NOVEMBER, 20 03

Notary Public [Signature]

Date Commission Expires \_\_\_\_\_



**KCC Office Use ONLY**

Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received

Geologist Report Received

UIC Distribution

X

Operator Name BP AMERICA PRODUCTION COMPANY

Lease Name NEFF, MINNIE

Well # 4

Sec. 20 Twp. 27 S.R. 39  East  West

County STANTON

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 all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken (Attach Additional Sheets.)  Yes  No  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No  
 Electric Log Run (Submit Copy.)  Yes  No

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums		<input type="checkbox"/> Sample
Name	Top	Datum	
CHASE	2265	KB	
COUNCIL GROVE	2542	KB	

List All E.Logs Run:  
**COMPENSATED SPECTRAL NATURAL GAMMA**

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 3/8"	24#	745	HLC PP	200	3%CC 1/4#FLO
					PREM PLUS	140	2%CC 1/4#FLO
PRODUCTION	7 7/8"	4 1/2"	10.5#	2650	HLC PP	515	1/4# FLOCELE

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 (Amount and Kind of Material Used)	Depth
4	2294-2304'; 2330-2340'; 2390-2400';	FRAC-200,000# OF 16/30 BRADY SAND	2294-2470
	2460-2470'	W/70Q FOAM	

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.				Producing Method
11/3/03				<input checked="" 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
	0	800	0	

Disposition of Gas: METHOD OF COMPLETION Production Interval

Vented  Sold  Used on Lease  Open Hole  Perforation  Dually Comp.  Commingled

(If vented, submit ACO-18.)  Other (Specify) \_\_\_\_\_





# HALLIBURTON JOB SUMMARY

SALES ORDER NUMBER <b>2715181</b>	TICKET DATE <b>10/11/03</b>
BDA / STATE <b>MC/Ks</b>	COUNTY <b>STANTON</b>
PSL DEPARTMENT <b>Cement</b>	<b>ORIGINAL</b> 806-255-8042
CUSTOMER REP / PHONE <b>DAN KISER</b>	
APIUM # <b>187210130000</b>	SAP BOMB NUMBER <b>7523</b>
HES FACILITY (CLOSEST TO WELL SITE) <b>Liberal Ks</b>	

REGION <b>Central Operations</b>	INMA / COUNTRY <b>Mid Contitnent/USA</b>
MBU ID / EMPL # <b>MCLI0101 106322</b>	H.E.S. EMPLOYEE NAME <b>Danny McLane</b>
LOCATION <b>LIBERAL</b>	COMPANY <b>BP AMERICA</b>
TICKET AMOUNT <b>\$7,772.01</b>	WELL TYPE <b>02 Gas</b>
WELL LOCATION <b>E/Johnson City,Ks</b>	DEPARTMENT <b>Cement</b>
LEASE NAME <b>MINNIE NEFF</b>	Well No. <b>4</b>
	SEC / TWP / RNG <b>20 - 27S - 39W</b>

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
<b>McLane, D 106322</b>	5.0			
<b>Lemieux, M 266576</b>	5.0			
<b>Ferguson, R 106154</b>	5.0			
<b>Howard, A.J. 285427</b>	5.0			

**RECEIVED**  
**NOV 24 2003**

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
<b>10547695</b>	<b>156</b>			
<b>10251401</b>	<b>156</b>			
<b>10240236 10240245</b>	<b>48</b>			
<b>10011406 10011272</b>	<b>48</b>			

**KCC WICHITA**

Form. Name \_\_\_\_\_ Type: \_\_\_\_\_  
 Form. Thickness \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Packer Type \_\_\_\_\_ Set At \_\_\_\_\_  
 Bottom Hole Temp. \_\_\_\_\_ Pressure \_\_\_\_\_  
 Retainer Depth \_\_\_\_\_ Total Depth \_\_\_\_\_

Date	Called Out	On Location	Job Started	Job Completed
	<b>10/11/2003</b>	<b>10/12/2003</b>	<b>10/12/2003</b>	<b>10/12/2003</b>
Time	<b>2100</b>	<b>0030</b>	<b>0315</b>	<b>0400</b>

Type and Size	Qty	Make
Float Collar		Howco
Float Shoe IFS 4 1/2	1	Howco
Centralizers		Howco
Top Plug 4 1/2	1	Howco
HEAD 4 1/2	1	Howco
Limit clamp		Howco
Weld-A		Howco
Guide Shoe		Howco
BTM PLUG		Howco

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	New	10.5#	4 1/2"		KB	2,650	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8"				Shots/Ft.
Perforations							
Perforations							
Perforations							

**Materials**

Mud Type	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
10/12	5.0	10/12	1.0	Cement Production Casing
<b>Total</b>	<b>5.0</b>	<b>Total</b>	<b>1.0</b>	

Ordered \_\_\_\_\_ Hydraulic Horsepower: \_\_\_\_\_ Used \_\_\_\_\_  
 Treating \_\_\_\_\_ Average Rates in BPM: \_\_\_\_\_ Overall \_\_\_\_\_  
 Feet 1 \_\_\_\_\_ Cement Left in Pipe \_\_\_\_\_  
 Reason \_\_\_\_\_ SHOE JOINT

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	616	HLC PP	Bulk	1/4# FLOCELE	11.41	2.04	12.27
2							
3							
4							

**Summary**

Circulating	Displacement	Preflush: BBI	6.00	Type: fresh water
Breakdown	MAXIMUM	Load & Bkdn: Gal - BBI		Pad: Bbl - Gal
Lost Returns	Lost Returns	Excess /Return BBI		Calc. Disp Bbl
Cmt Rtn #Bbl	Actual TOC	Calc. TOC:		Actual Disp.
Average	Frac. Gradient	Treatment: Gal - BBI		Disp: Bbl
Shut In: Instant	5 Min.	Cement Slurry BBI	187.0	
	15 Min.	Total Volume BBI	234.00	

Frac Ring #1 \_\_\_\_\_ Frac Ring #2 \_\_\_\_\_ Frac Ring #3 \_\_\_\_\_ Frac Ring #4 \_\_\_\_\_

THE INFORMATION STATED HEREIN IS CORRECT  
 CUSTOMER REPRESENTATIVE

*[Signature]*  
 SIGNATURE

