

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

Operator: License # # 7208

Name: LORAIN CLEAVER

Address 700 TEXAS ROAD

City/State/Zip COLONY, KANSAS 66015

Purchaser: PLAINS

Operator Contact Person: BETTY THORNHILL

Phone (620) 365-2515

Contractor: Name: LORAIN CLEAVER OIL

License: # 6056

Wellsite Geologist: NONE

Designate Type of Completion  
 New Well  Re-Entry  Workover

Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl. or other, etc.)

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

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

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

11/15/01 11/26/01 TA  
Spud Date Date Reached TD Completion Date

API NO. 15- 125300640000 **ORIGINAL**

County MONTGOMERY COUNTY

NE-SE SE NW Sec. 7 Twp. 32S Rge. 17E  E  W

2145 N Feet from S/W (circle one) Line of Section

2475 W 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 PAUL BIRD Well # 16

Field Name COFFEYVILLE/CHERRYVALE

Producing Formation BARTLESVILLE

Elevation: Ground N/A KB \_\_\_\_\_

Total Depth 761 PBTB \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from 761

feet depth to SURFACE w/ 103 sx cmt.

Drilling Fluid Management Plan ACT II KGR 1/14/08  
(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. \_\_\_\_\_

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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  Lorain Cleaver

Title OWNER Date 2/4/02

Subscribed and sworn to before me this 4TH day of FEBRUARY, 19 2002

Notary Public BETTY THORNHILL Betty Thornhill

Date Commission Expires 3/8/2002

BETTY THORNHILL  
Notary Public - State of Kansas  
My Appt. Expires 3/8/2002

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
G  Geologist Report Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other  
(Specify)

**ORIGINAL**

Operator Name **BORAINÉ CLEAVER OIL**

Lease Name **PAUL BIRD**

Well # **16**

Sec. **7** Twp. **32S** Rge. **17E**

East

County **MONTGOMERY**

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.)

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
LIME	0	24
SANDY SHALE	235	240
BIG SHALE	290	426
LIME	500	533
BL SHALE	550	557
SAND W/ LITE ODOR	707	712
SAND BROKEN W/GOOD SHOW	712	723
SHALE	723	761 TD

List All E.Logs Run:  
 DRILLERS LOG  
 CORE 706-726  
 SEATING NIPPLE 708

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	9	6"		20	PORTLAND	4	SACKS PREM GEL.
					50/50 POZ		
PRODUCTION	5 7/8	2 7/8		761	PORTLAND	103	SACKS PREM 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
	HAS NOT BEEN FRAC. OR PERF.	T.A.	

**TUBING RECORD** Size **2 7/8** Set At **761** Packer At **N/A** Liner Run  Yes  No

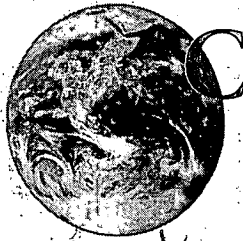
Date of First, Resumed Production, SWD or Inj. **T.A.** Producing Method  Flowing  Pumping  Gas Lift  T.A. Other (Explain)

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) **T.A.**

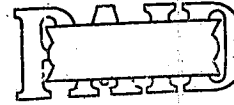
Production Interval \_\_\_\_\_



**CONSOLIDATED**  
**OIL WELL**  
**SERVICES, INC.**  
 AN INFINITY COMPANY

211 W. 14th, P.O. Box 884 Chanute, KS 66720 • 620/431-9210 • 1-800/467-8876

INVOICE DATE	INVOICE NO.
11/29/01	00176103



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**FEB 19 2002**  
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**TERMS:** Net 30 Days  
 A Finance Charge computed at 1% per month (annual percentage rate of 12%) will be added to balances over 30 days.

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CLEAVER, LORIANE DBA BLACK DIA  
 0700 TEXAS ROAD  
 COLONY KS 66015

*AWI BIRD  
 FF 16  
 CEMENT*

PLEASE REFER TO THIS ACCOUNT NUMBER WHEN MAKING INQUIRIES

ACCOUNT NO.	P.O. NO.	LOCATION	LEASE AND WELL NO.	DATE OF JOB	JOB TICKET NO.		
23	333	10	PAUL SPD 18	11/26/2001	1062		
ITEM NUMBER			DESCRIPTION	UNITS	UNIT PRICE	UNIT MEAS	EXTENDED PRICE
5401			CEMENT WATER	1.0000			525.00
5402			CASING FOOTAGE	755.0000			105.70
1118			PREMIUM CEMENT	4.0000			47.20
4492			2 1/2" ROOPER PLUS	1.0000			16.85
5407			BULK CEMENT DELIVERY/MIX BULK DEL	1.0000			190.00
1124			50/50 POZ CEMENT MIX	103.0000			829.15

*15-125-30064-0000*

**ORIGINAL**

GROSS INVOICE	TAX
1713.90	61.63

REMITTANCE COPY

PLEASE PAY
1775.53



# ORIGINAL

CONSOLIDATED OIL WELL SERVICES, INC.  
211 W. 14TH STREET, CHANUTE, KS 66720  
316-431-9210 OR 800-467-8676

TICKET NUMBER **20200**

LOCATION Cherryvale

FOREMAN Wayne

### TREATMENT REPORT

DATE <u>1/26/01</u>	CUSTOMER ACCT # <u>1823</u>	WELL NAME <u>Paul Bird</u>	QTR/QTR	SECTION <u>7</u>	TWP <u>32</u>	RGE <u>17</u>	COUNTY <u>Mont</u>	FORMATION
CHARGE TO <u>Cluser</u>				OWNER				
MAILING ADDRESS <u>0700 Texas Rd</u>				OPERATOR				
CITY <u>Colony</u>				CONTRACTOR				
STATE <u>KS</u>		ZIP CODE <u>66015</u>			DISTANCE TO LOCATION			
TIME ARRIVED ON LOCATION				TIME LEFT LOCATION				

#### WELL DATA

HOLE SIZE	
TOTAL DEPTH	
CASING SIZE	<u>2 7/8</u>
CASING DEPTH	<u>255</u>
CASING WEIGHT	
CASING CONDITION	
TUBING SIZE	
TUBING DEPTH	
TUBING WEIGHT	
TUBING CONDITION	
PACKER DEPTH	
PERFORATIONS	
SHOTS/FT	
OPEN HOLE	
TREATMENT VIA	<u>Cement Pump</u>

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#### TYPE OF TREATMENT

- |   |   |
|---|---|
| <input type="checkbox"/> SURFACE PIPE                 | <input type="checkbox"/> ACID BREAKDOWN   |
| <input checked="" type="checkbox"/> PRODUCTION CASING | <input type="checkbox"/> ACID STIMULATION |
| <input type="checkbox"/> SQUEEZE CEMENT               | <input type="checkbox"/> ACID SPOTTING    |
| <input type="checkbox"/> PLUG & ABANDON               | <input type="checkbox"/> FRAC             |
| <input type="checkbox"/> PLUG BACK                    | <input type="checkbox"/> FRAC + NITROGEN  |
| <input type="checkbox"/> MISC PUMP                    | <input type="checkbox"/> FOAM FRAC        |
| <input type="checkbox"/> OTHER                        | <input type="checkbox"/> NITROGEN         |

#### PRESSURE LIMITATIONS

	THEORETICAL	INSTRUCTED
SURFACE PIPE		
ANNULUS LONG STRING		
TUBING		

INSTRUCTION PRIOR TO JOB Cement Long String

#### JOB SUMMARY

DESCRIPTION OF JOB EVENTS Hooked on and Broke Circulation  
Ran 2 SK Prem. Gel Followed By 5 Bull. Flush  
Started Dye Ran 1 Bull Dye Followed By 103 SK Cement  
to Get Dye Back Stopped and Flushed the Pump  
then Pumped Plug to Bottom Shut In 800 PSI

#### PRESSURE SUMMARY

BREAKDOWN or CIRCULATING	psi
FINAL DISPLACEMENT	psi
ANNULUS	psi
MAXIMUM	psi
MINIMUM	psi
AVERAGE	psi
ISIP	psi
5 MIN SIP	psi
15 MIN SIP	psi

#### TREATMENT RATE

BREAKDOWN BPM	
INITIAL BPM	
FINAL BPM	
MINIMUM BPM	
MAXIMUM BPM	
AVERAGE BPM	

AUTHORIZATION TO PROCEED

TITLE

DATE

ALL THE TERMS AND CONDITIONS STATED ON THE REVERSE SIDE ARE INCORPORATED AS PART OF THIS SALE.

