

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 5317
 Name: Russell Freeman d/b/a Continental Energy
 Address: P.O. Box 918
 City/State/Zip: Garden City, KS 67846
 Purchaser: Pending
 Operator Contact Person: Jeff Kidd
 Phone: (620) 276-8710
 Contractor Name: Border-Line
 License: 7840
 Wellsite Geologist: None
 Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: Stanolind Oil & Gas Co.
 Well Name: Daniels Gas Unit #1
 Original Comp. Date: 9/3/55 Original Total Depth: 2287
 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. _____

<u>9/2/03</u>	<u>9/6/03</u>	<u>10/8/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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API No. 15 - 129-19008-00-01
 County: Morton
 _____ C _____ SW Sec. 13 Twp. 32 S. R. 41 East West
1321 feet from (S) / N (circle one) Line of Section
1330 feet from E / (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW (SW)
 Lease Name: Glenn Well #: 2 HI
 Field Name: Hugoton
 Producing Formation: Chase
 Elevation: Ground: 3372 Kelly Bushing: 3377
 Total Depth: 2357 Plug Back Total Depth: 2322
 Amount of Surface Pipe Set and Cemented at 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.

Drilling Fluid Management Plan owwo KGR 2-4-08
 (Data must be collected from the Reserve Pit)
 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. 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: [Signature]
 Title: Production Supervisor Date: 10-16-03
 Subscribed and sworn to before me this 16 day of Oct,
 20 03.
 Notary Public: [Signature]

Date Commission Expires: 10/11/04
 NOTARY PUBLIC - State of Kansas
 KAREN BOGNER
 My Appt. Exp. _____

KCC Office Use ONLY

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

ORIGINAL

Operator Name: Russell Freeman d/b/a Continental Energy Lease Name: Glenn Well #: 2 HI
 Sec. 13 Twp. 32 S. R. 41 East West County: Morton

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input 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	Hollenberg	2186	+1191
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Herington	2220	+1157
List All E. Logs Run:		Krider	2236	+1141
		Winfield	2283	+1094

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CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacjs Used	Type and Percent Additives
Production	4 7/8"	4 1/2"	10.5	2352	Common	100	2% 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
2	2188-2202 / 2220-2254 / 2283-2300 / 2310-2316	2500 Gallons 15% MCA + 213 Perf Balls Frac 77,000# 12/20 + Nitrogen	

TUBING RECORD		Size 2 1/16"	Set At 2320	Packer At	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. Pending		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (shut in) (Explain)			
Estimated Production Per 24 Hours	Oil Bbbs. None	Gas Mct 20	Water Bbbs. NW	Gas-Oil Ratio	Gravity

Disposition of Gas **(will be)** Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

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

Production Interval _____

ALLIED CEMENTING CO., INC. 13240 ORIGINAL

REMIT TO: PO BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Oakley

DATE <u>9-2-03</u>	SEC <u>13</u>	TWP. <u>32S</u>	RANGE <u>4W</u>	CALLED OUT <u>2:00</u>	ON LOCATION <u>2:00 PM</u>	JOB START <u>2:15 PM</u>	JOB FINISH <u>3:00 PM</u>
LEASE <u>Glean</u>		WELL # <u>2 HI</u>		LOCATION <u>Richfield 2 1/2 E N15</u>		COUNTY <u>Morton</u>	STATE <u>KS</u>
<input checked="" type="radio"/> OLD OR NEW (Circle one)							

CONTRACTOR Border Line
 TYPE OF JOB 4 1/2 Liner
 HOLE SIZE _____ T.D. _____
 CASING SIZE 4 1/2 DEPTH 2352'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG _____
 PERFS _____
 DISPLACEMENT 37 1/2 Bbls

OWNER Same
 CEMENT AMOUNT ORDERED 100sk Com 2% Gel

COMMON	<u>100sk</u>	@	<u>7.25</u>	<u>715.00</u>
POZMIX		@		
GEL	<u>2sk</u>	@	<u>10.00</u>	<u>20.00</u>
CHLORIDE		@		
		@		
		@		
		@		
		@		
HANDLING	<u>100sk</u>	@	<u>1.15</u>	<u>115.00</u>
MILEAGE	<u>59 mi. r/s</u>			<u>175.00</u>
TOTAL				<u>1025.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Dean
 # 373-281 HELPER Andrew/May
 BULK TRUCK # 309 DRIVER Larry
 BULK TRUCK # _____ DRIVER _____

REMARKS:

Pump 2 Bbls water at 400', mix 100sk Com 2% Gel, wash T&K & line, Disp 17 Bbls lost circulation. Pump at 18PM. Max press 500 & shut in 300'
Thank you

SERVICE

DEPTH OF JOB	<u>2352'</u>			
PUMP TRUCK CHARGE			<u>850.00</u>	
EXTRA FOOTAGE		@		
MILEAGE	<u>40 mi</u>	@	<u>3.50</u> <u>140.00</u>	
PLUG	<u>4 1/2 Plug</u>	@	<u>40.00</u>	
		@		
		@		
TOTAL				<u>1030.00</u>

CHARGE TO: Continental Energy
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>work on float shoe</u>			<u>210.00</u>	
		@		
		@		
		@		
		@		
TOTAL				<u>210.00</u>

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	<u>2265.00</u>	
DISCOUNT	<u>226.50</u>	IF PAID IN 30 DAYS
	<u>2038.50</u>	

SIGNATURE [Signature]

PRINTED NAME JEFF KIDD

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