

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 8047
Name: VICKERS FARMS OIL VENTURE
Address: BOX 7
City/State/Zip: WELLSVILLE KS 66092
Purchaser: CMT
Operator Contact Person: JERRY L VICKERS
Phone: (785) 883-2171
Contractor: Name: HUGHES DRILLING
License: 5682
Wellsite Geologist: NONE

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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: _____
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. _____

<u>111504</u>	<u>111804</u>	<u>122804</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 059-25041-00-00
County: FRANKLIN
W/2 SW NE NE Sec. 31 Twp. 16 S. R. 21 East West
4240 feet from (S) / N (circle one) Line of Section
1310 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: BRAUN Well #: 19
Field Name: PAOLA-RANTOUL
Producing Formation: SQUIRREL
Elevation: Ground: N/A Kelly Bushing: _____
Total Depth: 760 Plug Back Total Depth: 750
Amount of Surface Pipe Set and Cemented at 21.5 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 21.5
feet depth to 0 w/ 8 sx cmt.

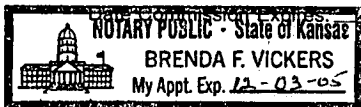
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit) *Alt II KKR 2/25/08*
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. 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: Partner Date: 1-11-05
Subscribed and sworn to before me this 11th day of January,
20 05.
Notary Public: [Signature]

December 3, 2005



KCC Office Use ONLY

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

Operator Name: VICKERS FARMS OIL VENTURE Lease Name: BRAUN Well #: 19
 Sec. 31 Twp. 16 S. R. 21 East West County: FRANKLIN

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 Yes No
 (Attach Additional Sheets)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy)
 List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 BROWN LIME 632
 SHALE 637
 SAND 640
 SHALE & LIME 643
 SAND 706
 SHALE AND LIME 713
 TD 760

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	# Sacks Used	Type and Percent Additives
SURFACE	11 7/8	7		21.5	COMM	8	NONE
PRODUCTION	5 1/4	2 7/8		750	PORTLAND	98	2% GEL

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
	SEE ATTACHED LOG	RECEIVED JAN 18 2005 KCC WICHITA	
	706.5 - 710.5		
	2" DML RTB		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	1 INCH	750		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
122804	<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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	1	TRACE		

Disposition of Gas Vented Sold Used on Lease (If vented, Submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled
 Production Interval Other (Specify) _____

CONSOLIDATED OIL WELL SERVICES, INC.
 211 W. 14TH STREET, CHANUTE, KS 66720
 620-431-9210 OR 800-467-8676

TICKET NUMBER 1342
 LOCATION Ottawa, KS
 FOREMAN Jim Green

TREATMENT REPORT & FIELD TICKET
 CEMENT

DATE	CUSTOMER #	WELL NAME & NUMBER	SECTION	TOWNSHIP	RANGE	COUNTY
11-18-04	8504	Vickers Farm #19	31	16	21	FR
CUSTOMER			TRUCK #	DRIVER	TRUCK #	DRIVER
Jerry Vickers			389	Jim Green		
MAILING ADDRESS			368	Alan Mader		
Box 7			370	Shanemanis		
CITY	STATE	ZIP CODE	194	Joe Polidore		
Wellsville	Ks	66092				
JOB TYPE	HOLE SIZE	HOLE DEPTH	CASING SIZE & WEIGHT			
Long string	5 7/8"	760	2 3/8" EUE 8			
CASING DEPTH	DRILL PIPE	TUBING	OTHER			
750'						
SLURRY WEIGHT	SLURRY VOL	WATER gal/sk	CEMENT LEFT in CASING			
14.5"			4 BPM			
DISPLACEMENT	DISPLACEMENT PSI	MIX PSI	RATE			
4.3	500					

REMARKS: Establish circulation. Mix and pump 2 sks gel to flush hole. Mix and pump 103 sks 5750 Poz Mix cement with 5% salt, 2% gel, 1/4" F10 Seal. Flush pump clear of cement. Pump 2 1/2" Rubber plug to total depth of casing, circulating cement to surface. Pressure up to 500. Well held good. Close valve.

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION of SERVICES or PRODUCT	UNIT PRICE	TOTAL
5401	1	PUMP CHARGE Cement One Well		710.00
5406	10	MILEAGE Pump to Mile		23.50
5407	750'	Casing footage		N/C
4402	1	2 3/8" Rubber Plug		15.00
1107	1	F10 Seal		40.00
1111	258"	Granubred Salt		67.08
1118	45K	Premium Gel		49.60
1124	98 SKS	5750 Poz Mix cement		676.20
5502C	2 1/2 HRS	Val TK		195.00

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6.8% SALES TAX 57.66
 ESTIMATED TOTAL 2059.04
 DATE 1834.04

TITLE 194132