

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

ORIGINAL

Operator: License # 33168
Name: WOOLSEY OPERATING COMPANY, LLC
Address: 125 N. Market, Suite 1000
City/State/Zip: Wichita, Kansas 67202-1775
Purchaser: Bluestem Gas Mktg & American Pipeline / Plains Mktg
Operator Contact Person: Dean Pattison, Operations Manager
Phone: (316) 267-4379 ext 107
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Roger Martin

API No. 15 - 191-22454 00-00
County: Sumner
130°N, 20°E NW NE NE Sec. 03 Twp. 33 S. R. 04 East West
530 feet from S / (N) (circle one) Line of Section
970 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Stephens Trust Well #: 1
Field Name: Argonia SE

Producing Formation: Mississippian
Elevation: Ground: 1232 Kelly Bushing: 1243
Total Depth: 6651 Plug Back Total Depth: 4461
Amount of Surface Pipe Set and Cemented at 319 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.

Designate Type of Completion: **CONFIDENTIAL**
 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: NOV 01 2005
 Deepening Re-perf. **RECEIVED KANSAS CORPORATION COMMISSION**
 Plug Back Plug Back Total Depth **NOV 01 2005 CONSERVATION DIVISION WICHITA, KS**
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>07/05/2005</u>	<u>07/27/2005</u>	<u>09/08/2005</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

Drilling Fluid Management Plan PAAL I NH 6-13-08
(Data must be collected from the Reserve Pit)
Chloride content 7000 ppm Fluid volume 400 bbls
Dewatering method used Haul off free fluids and allow to dehydrate
Location of fluid disposal if hauled offsite:
Operator Name: n/a
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.

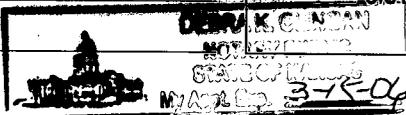
Signature: _____
Title: Dean Pattison, Operations Manager Date: 10/25/2005

Subscribed and sworn to before me this 25th day of October,
20 05

Notary Public: Debra K. Clingan
Date Commission Expires: March 15, 2006

KCC Office Use ONLY

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



Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: Stephens Trust Well #: 1
 Sec. 03 Twp. 33 S. R. 04 East West County: Sumner

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Compact Photo Density Compensated Neutron Array Induction Shallow Focused Sonic	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Kansas City</td> <td>3344</td> <td>- 2101</td> </tr> <tr> <td>Mississippian</td> <td>3985</td> <td>- 2742</td> </tr> <tr> <td>Simpson</td> <td>4332</td> <td>- 3089</td> </tr> <tr> <td>Arbuckle</td> <td>4462</td> <td>- 3219</td> </tr> <tr> <td>Granite Wash</td> <td>5509</td> <td>- 4266</td> </tr> </table>	Name	Top	Datum	Kansas City	3344	- 2101	Mississippian	3985	- 2742	Simpson	4332	- 3089	Arbuckle	4462	- 3219	Granite Wash	5509	- 4266
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Arbuckle	4462	- 3219																	
Granite Wash	5509	- 4266																	

CASING RECORD <input checked="" 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
Conductor	n/a						
Surface	14-1/4"	10-3/4"	30 #/ft	319	Class A	275	2%gel, 3%cc
Production	7-7/8"	4-1/2"	10.5 #/ft	4519	Class H	200	10% salt, 10% gyp, 6% kolseal, .75 FL, 1/4 # celloflake

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 <i>(Amount and Kind of Material Used)</i>	
			Depth	
4	3986' - 3994'	Mississippian	Acid: 1500 gal 10% HCL MIRA	same
			Frac: 93,000# sand & 5339 bbl slick wtr	same

TUBING RECORD	Size 2-3/8"	Set At 4080	Packer At none	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. WOPL	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. n/a	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

METHOD OF COMPLETION

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



ALLIED CEMENTING CO., INC. 20811

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

SERVICE POINT:
Medicineh.D.C.

DATE <u>7-29-05</u>	SEC. <u>3</u>	TWP. <u>33S</u>	RANGE <u>04W</u>	CALLED OUT <u>10:30 A.M.</u>	ON LOCATION <u>1:30 P.M.</u>	JOB START <u>7:30 P.M.</u>	JOB FINISH <u>8:20 P.M.</u>
STEPHENS LEASE TRUST		WELL # <u>#1</u>	LOCATION <u>Argonia 5S 2E</u>	COUNTY <u>Sumner</u>	STATE <u>Ks.</u>		
OLD OR <u>(NEW)</u> (Circle one)			<u>1N 1/4 W 5/10</u>				

CONTRACTOR Duke #1
 TYPE OF JOB long string
 HOLE SIZE 7 7/8 I.D. 6651
 CASING SIZE 4 1/2 DEPTH 4519
 TUBING SIZE DEPTH
 DRILL PIPE 4 1/2 DEPTH 6651
 TOOL DEPTH
 PRES. MAX MINIMUM 1000 PSI
 MEAS. LINE SHOE JOINT 41.25
 CEMENT LEFT IN CSG. 41.25 FT
 PERFS.
 DISPLACEMENT 41.25 FT KalwaTel
 EQUIPMENT
 PUMP TRUCK CEMENTER David W.
 # 397 HELPER Dwayne W.
 BULK TRUCK
 # 353 DRIVER Mike B.
 BULK TRUCK
 # DRIVER

OWNER Woolsey Operating Co.
 CEMENT
 AMOUNT ORDERED 50sx 60:40:40 .4%
SMS 200sx H 10% GYP 10% SALT
5# Kol Seal .8% FL-160 1/4# Flo Seal
500gal ASF 500gal Mud Clean 7gal KCl
 COMMON 30 A @ 8.20 261.00
 POZMIX 20 @ 4.70 94.00
 GEL 2 @ 14.00 28.00
 CHLORIDE CIA Pro 7gal @ 22.90 160.30
ASF Mud Clean 500 gal @ 1.00 500.00
Sodium Metasilicate 17 @ 1.60 27.20
200 "H" @ 10.50 2100.00
Gyp Seal 19 @ 19.15 363.85
Salt 22 @ 7.90 173.80
Kol Seal 1000 @ 1.60 600.00
FL-160 150 @ 8.70 1305.00
Flo Seal 50 @ 1.70 85.00
ASF 500 gal @ 1.00 500.00
 HANDLING 318 @ 1.60 508.80
 MILEAGE 60 x 318 x .06 1144.80
 TOTAL 7851.75

REMARKS:

OPC on Bottom Break Circ Pump
12 BBLs ASF 12 BBLs Mud Clean
Plug Rat w/ 15sx Pump 35sx 60:
40:40:40 SMS 200sx H 10% GYP 10% SALT
5# Kol Seal .8% FL-160 1/4# Flo Seal
Shutdown Wash Pump & Lines (D. H. W.)
KalwaTel slow Rate Pump Plug Rat
did hold wash up Rig Down.

SERVICE
 DEPTH OF JOB 4519'
 PUMP TRUCK CHARGE 1435.00
 EXTRA FOOTAGE @
 MILEAGE 60 @ 5.00 300.00
 MANIFOLD Head Rent @ 75.00 75.00
 TOTAL 1810.00

CHARGE TO: Woolsey Operating Co.
 STREET _____
 CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

4 1/2
 1-AFU Float Shoe @ 200.00 200.00
 1-latch Down Plug @ 300.00 300.00
 1-BASKET @ 116.00 116.00
 14-Turbolizers @ 55.00 770.00
 35-Scrappers @ 29.00 1015.00
 1-Rubber Plug @ 48.00 48.00
 TOTAL 2449.00

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.

ANY APPLICABLE TAX TOTAL CHARGE _____
 WILL BE CHARGED UPON INVOICING DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE X [Signature] X Allen F Dick
 PRINTED NAME

RECEIVED
 KANSAS CORPORATION COMMISSION
 NOV 11 2005
 CONSERVATION DIVISION
 WICHITA KS

ALLIED CEMENTING CO., INC. 20777

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

SERVICE POINT:
Medicine Lodge

DATE <i>7-5-06</i>	SEC. <i>3</i>	TWP. <i>33s</i>	RANGE <i>4w</i>	CALLED OUT <i>5:00 pm</i>	ON LOCATION <i>7:30 pm</i>	JOB START <i>1:30 am</i>	JOB FINISH <i>2:05 am</i>
STEPHENS TRUST LEASE			WELL # <i>1</i>	LOCATION <i>ARGONIA, Ss on MAIN ST.</i>		COUNTY <i>SUMNER</i>	STATE <i>KS.</i>
OLD OR <u>NEW</u> (Circle one)			<i>2E,</i>				

CONTRACTOR *Duke #1*

TYPE OF JOB *SURFACE*

HOLE SIZE <i>14 3/4"</i>	T.D. <i>319'</i>
CASING SIZE <i>10 3/4"</i>	DEPTH <i>319'</i>
TUBING SIZE	DEPTH
DRILL PIPE <i>4 1/2"</i>	DEPTH
TOOL	DEPTH
PRES. MAX <i>200</i>	MINIMUM <i>50</i>
MEAS. LINE	SHOE JOINT <i>15'</i>
CEMENT LEFT IN CSG. <i>15'</i>	
PERFS.	
DISPLACEMENT <i>30 1/2 bbl. FRESH WATER</i>	

OWNER *Woolsey OPERATING CO.*

CEMENT

AMOUNT ORDERED *275.00 CLASS A + 3% CC + 2% GEL*

COMMON <i>275 A</i>	@ <i>8.70</i>	<i>2392.50</i>
POZMIX	@	
GEL <i>5</i>	@ <i>14.00</i>	<i>70.00</i>
CHLORIDE <i>10</i>	@ <i>38.00</i>	<i>380.00</i>
ASC	@	

EQUIPMENT

PUMP TRUCK	CEMENTER <i>BILL M.</i>
# <i>360</i>	HELPER <i>TRAVY C.</i>
BULK TRUCK	
# <i>363</i>	DRIVER <i>MIKE A.</i>
BULK TRUCK	
#	DRIVER

RECEIVED

KANSAS CORPORATION COMMISSION

NOV 01 2006

CONSERVATION DIVISION

WICHITA KS

HANDLING <i>290</i>	@ <i>1.60</i>	<i>464.00</i>
MILEAGE <i>60 x 290 x .06</i>		<i>1044.00</i>
		TOTAL <i>4350.50</i>

REMARKS:

PIPE ON BOTTOM, AERIX CIRCULATION, PUMP 275.00 CLASS A + 3% CC + 2% GEL, STOP PUMPS, START DISPLACEMENT, WASH UP ON TOP OF PLUG, DISPLACE WITH 30 1/2 bbl. FRESH WATER, SHUT IN.

SERVICE

DEPTH OF JOB <i>319'</i>		
PUMP TRUCK CHARGE <i>0-300'</i>		<i>670.00</i>
EXTRA FOOTAGE <i>19'</i>	@ <i>.55</i>	<i>10.45</i>
MILEAGE <i>60</i>	@ <i>5.00</i>	<i>300.00</i>
MANIFOLD	@	
<i>Head Rental</i>	@ <i>75.00</i>	<i>75.00</i>
		TOTAL <i>1055.45</i>

CHARGE TO: *Woolsey OPERATING CO.*

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
		TOTAL _____

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TAX _____

TOTAL CHARGE ~~_____~~

DISCOUNT ~~_____~~ IF PAID IN 30 DAYS

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING

SIGNATURE *Mike Sedberry*

Mike Sedberry

PRINTED NAME