

\* Production data

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

*Amended*

Operator: License # 5056  
Name: F.G. Holl Company, L.L.C.  
Address: 9431 East Central, Suite #100  
City/State/Zip: Wichita, Kansas 67206-2543  
Purchaser: ONEOK  
Operator Contact Person: Franklin R. Greenbaum  
Phone: (316) 684-8481  
Contractor: Name: Duke Drilling Company Inc., Rig #1  
License: 5929  
Wellsite Geologist: Bill Ree

RECEIVED

APR 29 2005

KCC WICHITA

API No. 15 - 007-22,846-0000  
County: Barber  
C SE SE NE Sec. 20 Twp. 30 S. R. 13  East  West  
2310 feet from S (N) (circle one) Line of Section  
330 feet from (E) (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: LEMON TRUST "B" Well #: 1-20  
Field Name: Skinner

Producing Formation: Viola  
Elevation: Ground: 1852' Kelly Bushing: 1863'  
Total Depth: 4800' Plug Back Total Depth: 4735'  
Amount of Surface Pipe Set and Cemented at 240' 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:  
 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: F.G. Holl Company, L.L.C.  
Well Name: STB 101

Original Comp. Date: 09/15/2004 Original Total Depth: 4735'  
 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. \_\_\_\_\_

09/01/2004 09/17/2004 11/15/2004  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

Drilling Fluid Management Plan AH I NCR 7-23-08  
(Data must be collected from the Reserve Pit)

Chloride content 56,000 ppm Fluid volume 800 bbls  
Dewatering method used Hauled Free Fluids to SWD  
Location of fluid disposal if hauled offsite:  
Operator Name: F.G. Holl Company, L.L.C.  
Lease Name: KENNEDY -30 SWD License No.: 5056  
Quarter SW Sec. 30 Twp. 29 S. R. 12  East  West  
County: Pratt Docket No.: D-22,132

**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: Franklin R. Greenbaum  
Title: Exploration Manager Date: 04/26/2005

Subscribed and sworn to before me this 26th day of April, 2005  
19 Betty H. Spotswood  
Notary Public: Betty H. Spotswood

Date Commission Expires: 04/30/2006

Notary Public - State of Kansas  
BETTY H. SPOTSWOOD  
My Appointment Expires 4/30/2006

KCC Office Use ONLY  
NO Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
UIC Distribution

Operator Name: F.G. Holl Company, L.L.C. Lease Name: LEMON TRUST "B" Well #: 1-20  
 Sec. 20 Twp. 30 S. R. 13  East  West County: Barber

**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 checked="" type="checkbox"/> Yes <input 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:  DIL MEL/BHCS CNL/CDL	<input checked="" type="checkbox"/> Log <input type="checkbox"/> Formation (Top), Depth and Datum <input type="checkbox"/> Sample  Name _____ Top _____ Datum _____  See original ACO-1
--	---

CASING RECORD <input checked="" 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		13-3/8"		240'	60/40 Poz	275sx	
Production		4-1/2"		4784'	50/50 Poz	225sx	
					A-Serv. Lite	50sx	

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
1 BSPF	4498' - 4523' OA Viola		

TUBING RECORD		Size <u>2-3/8"</u>	Set At _____	Packer At _____	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>03/25/2005</u>		Producing Method <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 <u>525</u>	Water Bbls.	Gas-Oil Ratio	Gravity

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

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

Production Interval 4498' - 4523' OA Viola