

**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 # 32639  
 Name: CORAL PRODUCTION CORP.  
 Address: 1600 STOUT ST, SUITE 1500  
 City/State/Zip: DENVER, CO 80202  
 Purchaser: N/A  
 Operator Contact Person: JIM WEBER  
 Phone: (303) 623-3573  
 Contractor: Name: ALLIANCE WELL SERVICE  
 License: \_\_\_\_\_  
 Wellsite Geologist: N/A  
 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: KEENER OIL CO.  
 Well Name: #1 GRAYDON MURRAY  
 Original Comp. Date: 9/27/76 Original Total Depth: 4140  
 \_\_\_\_\_ 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>10/21/04</u>	<u>10/25/04</u>	<u>2/10/05</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

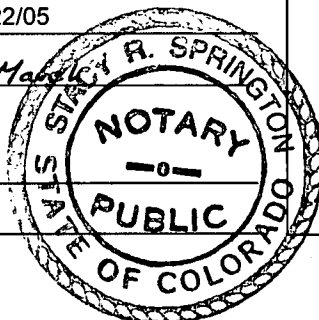
API No. 15 - 095-20513-00-01  
 County: KINGMAN  
 \_\_\_\_\_ C \_\_\_\_\_ SE Sec. 34 Twp. 28 S. R. 8  East  West  
1320 feet from (S) N (circle one) Line of Section  
1320 feet from (E) W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 (circle one) NE (SE) NW SW  
 Lease Name: ROHLMAN Well #: 1  
 Field Name: GARLISH SW  
 Producing Formation: MISS.  
 Elevation: Ground: 1634' Kelly Bushing: 1639'  
 Total Depth: 4140' Plug Back Total Depth: 4137'  
 Amount of Surface Pipe Set and Cemented at 208' 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.  
W0-1

**Drilling Fluid Management Plan** AH 1 NCR 7-21-08  
*(Data must be collected from the Reserve Pit)*  
 Chloride content 42000 ppm Fluid volume 1500 bbls  
 Dewatering method used \_\_\_\_\_  
 Location of fluid disposal if hauled offsite:  
 Operator Name: MESSENGER PETROLEUM  
 Lease Name: NICHOLAS #1 License No.: 4706  
 Quarter \_\_\_\_\_ Sec. 20 Twp. 30 S. R. 8  East  West  
 County: KINGMAN Docket No.: D-27434

**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: PRESIDENT Date: 3/22/05  
 Subscribed and sworn to before me this 31 day of March  
 2005.  
 Notary Public: [Signature]  
 Date Commission Expires: 2/1/2009



**KCC Office Use ONLY**

NO - Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 \_\_\_\_\_ Wireline Log Received  
 \_\_\_\_\_ Geologist Report Received  
 \_\_\_\_\_ UIC Distribution

Operator Name: CORAL PRODUCTION CORP. Lease Name: ROHLMAN Well #: 1  
 Sec. 34 Twp. 28 S. R. 8  East  West County: KINGMAN

**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 type="checkbox"/> Yes <input checked="" 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:  <b>GR, NEUTRON CCL 4134'-3330'</b>	<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>LANSING</td> <td>3432</td> <td>-1793</td> </tr> <tr> <td>BKS</td> <td>3869</td> <td>-2230</td> </tr> <tr> <td>CHERT</td> <td>4027</td> <td>-2388</td> </tr> <tr> <td>MISS</td> <td>4117</td> <td>-2478</td> </tr> </table>	Name	Top	Datum	LANSING	3432	-1793	BKS	3869	-2230	CHERT	4027	-2388	MISS	4117	-2478
Name	Top	Datum														
LANSING	3432	-1793														
BKS	3869	-2230														
CHERT	4027	-2388														
MISS	4117	-2478														

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
PRODUCTION	7 7/8"	4 1/2"	10.5	4140	ASC	150	GAS BL 7%

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
2	4118'-4122'	10% HCL - 80 BBL; FRAC: 9000# 20/40 SD, 1000# 12/20 RESIN SD	4118-4122
	<b>RECEIVED</b>		
	<b>APR 04 2005</b>		
	<b>KCC WICHITA</b>		

TUBING RECORD	Size <b>2 7/8"</b>	Set At <b>4100'</b>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. <b>N/A; APPLYING FOR SWD USE</b>		Producing Method <input type="checkbox"/> Flowing <input 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

Disposition of Gas      **METHOD OF COMPLETION**      Production Interval

Vented  Sold  Used on Lease  Open Hole  Perf.  Dually Comp.  Commingled \_\_\_\_\_  
*(If vented, Submit ACO-18.)*  Other (Specify) \_\_\_\_\_

# ORIGINAL ALLIED CEMENTING CO., INC. 18072

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

SERVICE POINT:  
Medicine Lodge

DATE <u>10-25-04</u>	SEC. <u>34</u>	TWP. <u>28S</u>	RANGE <u>8W</u>	CALLED OUT <u>10:00 AM</u>	ON LOCATION <u>11:00 AM</u>	JOB START <u>9:30 PM</u>	JOB FINISH <u>10:15 PM</u>
LEASE <u>Rohlman</u>		WELL# <u>1</u>	LOCATION <u>Spivey 8N, N/W into</u>			COUNTY <u>Kingman</u>	STATE <u>Ks.</u>
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Forest Eng. #7  
 TYPE OF JOB production  
 HOLE SIZE 7 7/8 T.D. 4140'  
 CASING SIZE 4 1/2" x 10-5 DEPTH 4140'  
 TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_  
 TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_  
 PRES. MAX 1100 MINIMUM 100  
 MEAS. LINE \_\_\_\_\_ SHOE JOINT 8"  
 CEMENT LEFT IN CSG. \_\_\_\_\_

OWNER Coral Production Corp.

PERFS. \_\_\_\_\_  
 DISPLACEMENT 67 Bbls 2% KCL water

CEMENT  
 AMOUNT ORDERED 9 gals Clapro 500 gals mud-clean 150 5x ASC + 5# Kol-seal + 7# Gas Block 15 5x 60:40:4

EQUIPMENT  
 PUMP TRUCK CEMENTER Carl Balding  
 # 360-302 HELPER Dwayne West  
 BULK TRUCK  
 # 363 DRIVER Jerry Cushinbery  
 BULK TRUCK  
 # \_\_\_\_\_ DRIVER \_\_\_\_\_

COMMON <u>A</u>	<u>9.5x</u>	@	<u>7.85</u>	<u>70.65</u>
POZMIX	<u>6.5x</u>	@	<u>4.10</u>	<u>24.60</u>
GEL	<u>1.5x</u>	@	<u>11.00</u>	<u>11.00</u>
CHLORIDE		@		
ASC	<u>150 5x</u>	@	<u>9.80</u>	<u>1470.00</u>
	<u>Kol-seal 750#</u>	@	<u>.50</u>	<u>375.00</u>
	<u>Gas Block 99#</u>	@	<u>7.00</u>	<u>693.00</u>
	<u>Clapro 9 gals</u>	@	<u>22.90</u>	<u>206.10</u>
	<u>mud-clean 500 gals</u>	@	<u>1.00</u>	<u>500.00</u>
<b>RECEIVED</b>				
<u>APR 04 2005</u>				
<b>KCC WICHITA</b>				
HANDLING	<u>210</u>	@	<u>1.35</u>	<u>283.50</u>
MILEAGE	<u>210 x 35 x .05</u>			<u>367.50</u>
				<b>TOTAL <u>4001.35</u></b>

**REMARKS:**

Run casing + Break circulation. Circulate on bottom for 30 minutes. Pump 20 Bbls 2% KCL + freshwater 12 Bbls mud-clean + 3 Bbls freshwater. plug bit with 15 5x 60:40:4 Mix + pump 150 5x ASC + additives. Wash out pump + lines + Release plug. Displace with 67 Bbls 2% KCL land plug + float held.

Coral Production Corp

CHARGE TO \_\_\_\_\_  
 STREET \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**SERVICE**

DEPTH OF JOB	<u>4140'</u>		
PUMP TRUCK CHARGE			<u>1245.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>35</u>	@	<u>4.00</u>
		@	
		@	
		@	
<b>TOTAL <u>1385.00</u></b>			

**PLUG & FLOAT EQUIPMENT**

MANIFOLD	<u>1- TRP</u>	@	<u>48.00</u>
	<u>1- Reg Guideshoe</u>	@	<u>125.00</u>
	<u>1- ARV insert</u>	@	<u>210.00</u>
	<u>4- Centralizers</u>	@	<u>45.00</u>
		@	
<b>TOTAL <u>563.00</u></b>			

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 ~~\_\_\_\_\_~~  
 DISCOUNT ~~\_\_\_\_\_~~ IF PAID IN 30 DAYS

SIGNATURE [Signature]

ANY APPLICABLE TAX WILL BE CHARGED UPON INVOICING  
 PRINTED NAME \_\_\_\_\_