

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 33097
Name: Southern Star Central Gas Pipeline
Address: 4700 Hwy. 56 P.O. Box 20010
City/State/Zip: Owensboro, Kentucky 42304-0010
Purchaser: _____
Operator Contact Person: D. Mark Rouse
Phone: (270) 852-4490
Contractor: Name: King's Well Service LLC
License: 33728
Wellsite Geologist: Mark Rouse
Designate Type of Completion:
____ New Well ____ Re-Entry Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)
If Workover/Re-entry: Old Well Info as follows:
Operator: Southern Star Central Gas Pipeline
Well Name: Alden 0-14
Original Comp. Date: 9/04/1964 Original Total Depth: 3490'
____ 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. Gas Storage Observation
9/8/2006 9/13/2006
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 159-30194-00-01
County: Rice
____ SE ____ SE ____ SW Sec. 10 Twp. 21 S. R. 9 East West
354' feet from (S) N (circle one) Line of Section
3370' 3070 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Alden Gas Storage Well #: 0-14
Field Name: Alden Gas Storage
Producing Formation: Misener Ss.
Elevation: Ground: 1670' Kelly Bushing: _____
Total Depth: 3490' Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 233' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 0
feet depth to 233 w/ 195 sx cmt.
ATZ - Dlg - 10/6/08

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: Hurricane Trucking and Well Service
Lease Name: Curry Disposal License No.: 32006
Quarter _____ Sec. 15 Twp. 22 S. R. 11 East West
County: Greenwood Docket No.: D-26,554

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: D. Mark Rouse
Title: Staff Geologist Date: 10-30-2006
Subscribed and sworn to before me this 30th day of October,
20 06.
Notary Public: Shelley A. Rouse
Date Commission Expires: 10-30-2009

KCC Office Use ONLY

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

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Operator Name: Southern Star Central Gas Pipeline Lease Name: Alden Gas Storage Well #: 0-14
 Sec. 10 Twp. 21 S. R. 9 East West County: Rice

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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
surface (existing)	10 3/4"	8 5/8"	NA	233'	NA	195	
production (existing)	7 7/8"	4.5"	NA	3489	NA	100	
production	7 7/8"	2 3/8"	4.5	3390'	OWC	285	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	0-3489' (4.5")	OWC	575	

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
4 shots./ft.	3268'-3276' Misener Ss.		

TUBING RECORD		Size	Set At	Packer At	Liner Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. Gas Storage Observation			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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

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TREATMENT REPORT

Acid Stage No.

Date: 9-15-06 District: GB F. O. No. C 030616
 Company: KING Well Service
 Well Name & No.: Alden 014
 Location: _____ Field: _____
 County: RICE State: KS
 Casing: Size 4 1/2 Type & Wt. _____ Set at _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Formation: _____ Perf. _____ to _____ ft.
 Lining: Size _____ Type & Wt. _____ Top at _____ ft. Bottom at _____ ft.
 Cemented: Yes/No _____ Perforated from _____ ft. to _____ ft.
 Tubing: Size & Wt. 2 3/8 Swung at _____ ft.
 Perforated from _____ ft. to _____ ft.
 Screen Hole Size _____ T. D. _____ ft. P. H. to _____ ft.

Type Treatment: Amt. _____ Type Fluid _____ Sand Size _____ Pounds of Sand _____
 Breakdown: _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 _____ Bbl. /Gal. _____
 Flush: _____ Bbl. /Gal. _____
 Treated from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 from _____ ft. to _____ ft. No. ft. _____
 Actual Volume of Oil / Water to Lead Hole: _____ Bbl. /Gal. _____
 Pump Trucks, No. Used: Std. 320 _____
 Auxiliary Equipment _____
 Packer: _____ Set at _____ ft.
 Auxiliary Tools _____
 Plugging or Sealing Materials: Type _____

Company Representative: KING Treater: A.G. CURTIS

TIME a.m / p.m.	PRESSURES		Total Fluid Pumped	REMARKS
	Tubing	Casing		
<u>16:00</u>				<u>ON LOC</u>
				<u>BREAK CIRCULATION DOWN</u>
				<u>2 3/8 TUBING GOOD CIRCULATION</u>
				<u>MIX CEMENT</u>
				<u>275 SACS 60/100 P02</u>
				<u>CEMENT DID CIRCULATE</u>
				<u>DISPLACE CEMENT</u>
<u>18:45</u>				<u>PLUG DOWN 13 1/4 BBL'S</u>
				<u>1700 PSI</u>
				<u>RELEASED PLUG HOLD</u>
				<u>SHUT IN.</u>
				<u>JOB COMPLETE</u>
				<u>THANK YOU</u>
				<u>A.G. CURTIS</u>

KEN'S PRINT #7899

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COPELAND

POST OFFICE BOX 438
 HAYSVILLE, KS 67060
 (316) 524-1225
 (316) 524-1027 FAX

Acid & Cement

BURRTON, KS GREAT BEND, KS
 (620) 463-5161 (620) 793-3366
 FAX (620) 463-2104 FAX (620) 793-3536

INVOICE NUMBER:
 C030616-IN

BILL TO:
 KING'S WELL SERVICE LLC
 P O BOX 323
 BLACKWELL, OK 74631-0323

LEASE: ALDEN 0-14

DATE	ORDER	SALESMAN	ORDER DATE	PURCHASE ORDER	SPECIAL INSTRUCTIONS	
9/27/2006	030616		9/15/2006		NET 30	
QUANTITY	U/M	ITEM NO./DESCRIPTION		D/C	PRICE	EXTENSION
35.00	EA	PICK UP MILES			1.00	35.00
35.00	MI	PUMP TRUCK MILEAGE			3.00	105.00
1.00	EA	PUMP CHARGE			900.00	900.00
275.00	SAX	60-40 POZ MIX			7.70	2,117.50
275.00	EA	BULK CHARGE			1.25	343.75
423.50	MI	BULK TRUCK - TON MILES			1.10	465.85
1.00	EA	20% FUEL SURCHARGE			301.17	301.17
FUEL SURCHARGE IS NOT TAXABLE AND IS ADDED TO MILEAGE, PUMP AND OR DELIVERY CHARGES ONLY.						
REMIT TO: P.O. BOX 438 HAYSVILLE, KS 67060		COP-GRB		Net Invoice:		4,268.27
RECEIVED BY _____		NET 30 DAYS		Sales Tax:		56.70
				Invoice Total:		4,324.97

There will be a charge of 1.5% (18% annual rate) on all accounts over 30 days past due.

Copeland Acid & Cement is a subsidiary of Gressel Oil Field Service, Inc.

Gressel Oil Field Service, Inc. reserves a security interest in the goods sold until the same are paid for in full and reserve all the rights of a secured party under the Uniform Commercial Code.

15189.90

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

SERVICE POINT:

C. P. 77 Bond

DATE <u>9-13-06</u>	SEC. <u>12</u>	TWP. <u>21S</u>	RANGE <u>9W</u>	CALLED OUT <u>5:30 PM</u>	ON LOCATION <u>Wilson</u>	JOB START <u>9:00 AM</u>	JOB FINISH <u>11:00 AM</u>
LEASE <u>Alford Storage</u>	WELL # <u>0-11</u>	LOCATION <u>Alford - 1/2 south - 1/2 east</u>		COUNTY <u>Wilson</u>	STATE <u>KS</u>		
OLD OR NEW (Circle one)				<u>new</u>			

CONTRACTOR King Well Service OWNER King Well Service

TYPE OF JOB Retainer Square to RWG

HOLE SIZE _____ T.D. _____ CEMENT _____

CASING SIZE 4 1/2 DEPTH 2730' AMOUNT ORDERED 670 cu yd 15/35 1/0 gravel

TUBING SIZE 24 DEPTH 2680' used 575 cu cement

DRILL PIPE _____ DEPTH _____

TOOL Retainer DEPTH 2680'

PRES. MAX _____ MINIMUM _____ COMMON _____ @ _____

MEAS. LINE _____ SHOE JOINT _____ POZMIX _____ @ _____

CEMENT LEFT IN CSG. _____ GEL _____ @ _____

PERFS. _____ CHLORIDE _____ @ _____

DISPLACEMENT 10' 3BL ASC _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER Jack _____ @ _____

150 HELPER John _____ @ _____

BULK TRUCK _____ @ _____

314 DRIVER Brandon _____ @ _____

BULK TRUCK _____ @ _____

311 DRIVER Kevin _____ @ _____

HANDLING 673.04 @ 1.90 1278.70

MILEAGE 673.04 @ 3.4 2059.38

TOTAL 9059.38

REMARKS:

Work at well on west side of lot. The shot in. Work tubing - Displace 10' EBL to 6' surface. Check - mix 575 cu cement - no 1/2, 200 to replace. Shut down to new well on

Thanks

SERVICE

DEPTH OF JOB 2680

PUMP TRUCK CHARGE _____ 95.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 34 @ 6.00 204.00

MANIFOLD _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 1159.00

CHARGE TO: King Well Service

STREET _____

CITY _____ STATE _____ ZIP _____

PLUG & FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

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.

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