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KANSAS CORPORATION COMMISSION

AUG 28 2008

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form must be Typed

cc - Jim

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 9952 WICHITA, KS
Name: BP AMERICA PRODUCTION COMPANY
Address P. O. BOX 3092, WL1-RM 6.128, WL-1
City/State/Zip HOUSTON, TX 77253-3092
Purchaser: _____
Operator Contact Person: DEANN SMYERS
Phone (281) 366-4395
Contractor: Name: _____
License: _____
Wellsite Geologist: _____

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/Reentry: Old Well Info as follows:
Operator: BP AMERICA PRODUCTION COMPANY
Well Name: RUSSELL GAS UNIT A WELL NO. 2
Original Comp. Date 08/08/72 Original Total Depth 2826
_____ 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. _____
04/28/08 _____ 05/27/08
Spud Date or _____ Date Reached TD _____ Completion Date or
Recompletion Date _____ Recompletion Date _____

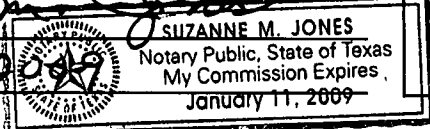
API NO. 15- 187-20053-0801
County STANTON
NW NW NE SE Sec. 23 Twp. 28S S. R. 39W E W
2590' FSL Feet from S/N (circle one) Line of Section
1250' FEL Feet from E/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name RUSSELL GAS UNIT A Well # 2
Field Name PANOMA
Producing Formation CHASE/COUNCIL GROVE
Elevation: Ground 3157 Kelley Bushing 3165
Total Depth 2826 Plug Back Total Depth _____
Amount of Surface Pipe Set and Cemented at _____ 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.

Drilling Fluid Management Plan WO-AH I NCR
(Data must be collected from the Reserve Pit) 9-22-08
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. _____ E W
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 on 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 DeAnn Smyers
Title REGULATORY STAFF ASSISTANT Date 08/14/08
Subscribed and sworn to before me this 25th day of AUGUST
20 08
Notary Public Suzanne M. Jones
Date Commission Expires 1-11-2009



KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
Jim H.

Operator Name BP AMERICA PRODUCTION COMPANY Lease Name RUSSELL GAS UNIT A Well # 2

Sec. 23 Twp. 28S S.R. 39W East West County STANTON

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. 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:

COMPENSATED ACOUSTIC VELOCITY LOG - 07/25/72

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Name	Top	Datum
CHASE	2302	KB
COUNCIL GROVE	2611	KB

CASING RECORD New 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	12-1/4"	8-5/8"	23#	665	PLITE3%/'C'	400	2%CC:1/4#FLOC
PRODUCTION	7-7/8"	5-1/2"	14#	2826	PLITE3%/'C'	510	2%CC:1/4#FLOC

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose ____ Perforate ____ Protect Casing ____ Plug Back TD ____ Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

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	2362-2372 / HERRINGTON	ACID - 15% HCL ACID / 2000 GALS.	
	2424-2444 / WINFIELD	FRAC W/ 150,000# 8/16 BRADY SAND	
	2472-2492 / TOWANDA	& 54,000 GALS 70Q N2 - 5/16/2008	
	2492-2502 / FORT RILEY		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. 05/22/08	Producing Method <input checked="" 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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perforation Dually Comp. Commingled
(If vented, submit ACO-18.) Other (Specify) _____