

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 # 32864
Name: XTO Energy Inc.
Address: 210 Park Ave., Suite 2350
City/State/Zip: Oklahoma City, Oklahoma 73102
Purchaser: Oneok Field Services
Operator Contact Person: Bruce Hankins
Phone: (405) 319-3208
Contractor: Name: Thornton Drilling
License: 4815
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/Re-entry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 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>01-01-2006</u>	<u>01-04-2006</u>	<u>02-03-2006</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 093-21772-0000
County: Kearny
NW_NW_SE_SE Sec. 35 Twp. 25 S. R. 36 East West
1250 feet from (S) N (circle one) Line of Section
1250 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Masonic Home Well #: 4-2R-35

Field Name: Panoma Council Grove
Producing Formation: Council Grove
Elevation: Ground: 3025' Kelly Bushing: 3031'
Total Depth: 3025' Plug Back Total Depth: 2981'
Amount of Surface Pipe Set and Cemented at 19 jts @ 572 Feet
Multiple Stage Cementing Collar Used? Yes No

Yes show depth set _____ Feet
If Alternate II completion, cement circulated from 3012'
300 depth to Surface w/ 395 _____ sx cmt.

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Drilling Fluid Management Plan
112-DIG - 10/21/08

(Data must be collected from the Reserve Pit)
Chloride content 6400 ppm Fluid volume 900 bbls
Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____
Operator Name: _____
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: Bruce E. Hankins
Regulatory & Data
Title: Processing Manager Date: 03-14-2006

Subscribed and sworn to before me this 14th day of March
2006

Notary Public: Joyce A. Williams
Date Commission Expires: 8-11-08
Oklahoma County
Notary Public in and for
State of Oklahoma
Commission # 00013369 Expires 8/11/08

KCC Office Use ONLY

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

ORIGINAL

Side Two

Operator Name: XTO Energy Lease Name: Masonic Home Well #: 4-2R-35
 Sec. 35 Twp. 25 S. R. 36 East West County: Kearny

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i></p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i></p> <p>List All E. Logs Run:</p> <p>Cement Bond Log, Array Induction, and Compensated Density</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Log Name</th> <th>Formation (Top), Depth and Datum</th> <th>Sample Datum</th> </tr> </thead> <tbody> <tr> <td>Council Grove Group</td> <td>2702'</td> <td></td> </tr> <tr> <td>Funston</td> <td>2725'</td> <td></td> </tr> <tr> <td>Crouse</td> <td>2770'</td> <td></td> </tr> <tr> <td>Middleburg</td> <td>2787'</td> <td></td> </tr> <tr> <td>Council Grove Bottom</td> <td>2934'</td> <td></td> </tr> </tbody> </table>	Log Name	Formation (Top), Depth and Datum	Sample Datum	Council Grove Group	2702'		Funston	2725'		Crouse	2770'		Middleburg	2787'		Council Grove Bottom	2934'	
Log Name	Formation (Top), Depth and Datum	Sample Datum																	
Council Grove Group	2702'																		
Funston	2725'																		
Crouse	2770'																		
Middleburg	2787'																		
Council Grove Bottom	2934'																		

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	12 1/4"	8 5/8"	32#	572'	Prem. Plus	290	CaCl & Flocele
Production	7 7/8"	5 1/2"	17#	3012'	Prem. Plus	395	FWCA & Flocele

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
2SPF	2732-2744' (25 holes), 2771-2778' (15 holes), and 2792-2798' (13 holes)	Acidize w/2700 gals 15% NeFe Acid. Frac w/50,000 gals 75Q Foam w/30# gel.	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	2811'	None	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Date of First, Resumed Production, SWD or Enhr.	Producing Method						
02-09-2006	Flowing <input type="checkbox"/>	Pumping <input checked="" type="checkbox"/>	Gas Lift <input type="checkbox"/>	Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	0	86	13	NA			

Disposition of Gas Vented Sold Used on Lease Other (Specify) _____

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____

Production Interval _____

HALLIBURTON JOB LOG				TICKET # 4140864	TICKET DATE 01/02/06
REGION Central Operations		NWA / COUNTRY Mid Contitnent/USA		BDA / STATE MC/Ks	COUNTY KEARNY
MBU ID / EMPL # MCIL 0110 / 195811		H.E.S EMPLOYEE NAME MERSHEK WILTSHIRE		PSL DEPARTMENT Cement	
LOCATION LIBERAL		COMPANY XTO ENERGY INC		CUSTOMER REP / PHONE BILL CUSTARD 405-313-8750	
TICKET AMOUNT \$12,454.63		WELL TYPE 01 Oil		API/WVI #	
WELL LOCATION LAKIN, KS		DEPARTMENT ZI		JOB PURPOSE CODE Cement Surface Casing	
LEASE NAME MASONIC HOME		Well No. 4-2R-35	SEC / TWP / RNG 35 - 25S - 36W	RES FACILITY (CLOSEST TO WELL S) LIBERAL, KS	

HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS	HES EMP NAME/EMP # (EXPOSURE HOURS)	HRS
Wiltshire, M 195811	10						
Chavez, E 3478815	10						
Bellows, B 366449	5						
	2						

Chart No.	Time	Rate (BPM)	Volume (BBL/GAL)	Rate		Press. (PSI)		Job Description / Remarks
				N2	CSG.	CSG.	Tbg	
	1530							CALLED FOR JOB
	1830							ARRIVE ON LOCATION
	1815							PRE-JOB SAFTEY MEETING
	1830							SPOT EQUIPMENT
								RUNNING CASING
								CASING ON BOTTOM/// CIRCULATE
	2207					2000		PRESSURE TEST
	2208	6.5	0-87			120		START LEAD 166 SKS (MIDCON PP) @ 11.3#
	2222	6.5	0-30			140		START TAIL 126 SKS (PREM PLUS) @ 14.8#
	2227	6.5	117.0			150		END CEMENT/// DROP PLUG
	2228	2.0	0-23			0		START DISPLACEMENT (WATER)
	2233	6.0	12.0			100		REACHED CEMENT
	2235	2.0	23-33			200		SLOW RATE
	2237	2.0	33.0			800		BUMP PLUG/// FLOAT HELD
						200		PRESSURE BEFORE LANDING PLUG
								DIDN'T CIRCULATE CEMENT
								WAIT TO 1 INCH
	0230							TAG CEMENT
								CEMENT 40 FT BELOW SURFACE
	0310	2.0	0-36			200		START CEMENT 160 SKS (PREM PLUS) @ 14.8#
	0333	2.0	36.0			110		END CEMENT
	0334							END JOB

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HALLIBURTON JOB SUMMARY		SALES ORDER NUMBER 4140864	TICKET DATE 01/02/06
REGION Central Operations	NWA / COUNTRY Mid Continent/USA	BDA / STATE MC/Ks	COUNTY KEARNY
MBU ID / EMPL # MCIL 0110 / 195811	H.E.S. EMPLOYEE NAME MERSHEK WILTSHIRE	PSL DEPARTMENT Cement	
LOCATION LIBERAL	COMPANY XTO ENERGY INC	CUSTOMER REP / PHONE 30 BILL CUSTARD 405-313-8750	
TICKET AMOUNT \$12,454.63	WELL TYPE 01 Oil	API/WVI #	
WELL LOCATION LAKIN, KS	DEPARTMENT ZI	SAP BOMB NUMBER 7521	Cement Surface Casing
LEASE NAME MASONIC HOME	Well No. SEC / TWP / RNG 1-2R-3 35 - 25S - 36W	HES FACILITY (CLOSEST TO WELL SITE) LIBERAL, KS	

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Wiltshire, M 195811	10.0			
Chavez, E 3478816	10.0			
Bellows, B 366449	5.0			
Lopez, C 321976	2.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10251403	140			
10547690	140			
10240236-10240245	70			
10243558-10011278	70			

Form Name _____ Type: _____
 Form Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	1/2/2006	1/2/2006	1/2/2006	1/2/2006
Time	1530	1830	2207	0334

Tools and Accessories

Type and Size	Qty	Make
Float Collar INSERT	1	H
Float Shoe		O
Centralizers	3	W
Top Plug HWE	1	C
HEAD	1	H O
Limit clamp	1	O
Weld-A	1	W
Guide Shoe TT	1	C
BTM PLUG		O

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	NEW	24#	8 5/8"		0	579	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			12 1/4'				Shots/Ft.
Perforations							
Perforations							
Perforations							

Materials

	Density	Lb/Gal
Mud Type		
Disp. Fluid		
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		
Other		

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
1/2	5.5	1/2	0.5	
1/3	3.5	1/3	0.5	
Total	9.0	Total	1.0	

Ordered _____ Hydraulic Horsepower Avail. _____ Used _____
 Treating _____ Average Rates in BPM Disp. _____ Overall _____
 Feet 34 Cement Left in Pipe Reason SHOE JOINT

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Cement Data

Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	160	MIDCON PP		3% CC - 1/2# FLOCELE - .1% FWCA	18.94	3.06	11.30
2	125	PREM PLUS		2% CC - 1/4# FLOCELE	6.30	1.34	14.80
3							
4							

Summary

Circulating Displacement	Preflush: BBI	Type:
Breakdown MAXIMUM	Load & Bkdn: Gal - BBI	Pad:Bbl - Gal
Lost Returns: Actual TOC	Excess /Return BBI	Calc. Disp Bbl
Cmt Rtn#Bbl	Calc. TOC:	Actual Disp. 33
Average Frac. Gradient	Treatment Gal - BBI	Disp:Bbl
Shut In: Instant 5 Min. 15 Min	Cement Slurry BBI	
	Total Volume BBI	153.0
		#VALUE!

Frac Ring #1 | Frac Ring #2 | Frac Ring #3 | Frac Ring #4

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE *[Signature]* SIGNATURE

4147166

HALLIBURTON JOB LOG		TICKET # 4147159	TICKET DATE 01/05/06
REGION Central Operations	NWA / COUNTRY Mid Continent/USA	BDA / STATE MC/Ks	COUNTY KEARNY
MBU ID / EMPL # MCIL 0110 / 198516	H.E.S EMPLOYEE NAME JASON CLEMENS	PSL DEPARTMENT Cement	
LOCATION LIBERAL	COMPANY XTO ENERGY INC	CUSTOMER REP / PHONE BILL CUSTARD 405-313-8750	
TICKET AMOUNT \$15,054.00	WELL TYPE 01 Oil	API/UWI #	
WELL LOCATION LAKIN	DEPARTMENT ZI	JOB PURPOSE CODE Cement Production Casing	
LEASE NAME MASONIC HOME	Well No. 4-2R-35	SEC / TWP / RNG 35 - 25S - 36W	RES FACILITY CLOSEST TO WELL S LIBERAL, KS

HRS	EMP NAME/EMP # (EXPOSURE HOURS)	HRS	EMP NAME/EMP # (EXPOSURE HOURS)	HRS	EMP NAME/EMP # (EXPOSURE HOURS)	HRS	EMP NAME/EMP # (EXPOSURE HOURS)
3	Clemens, A 198516						
3	Arnett, J 226587						
3	Baray, V 242219						
3	MILBOURN 321935						

Chart No.	Time	Rate (BPM)	Volume (BSL/GAL)	Rate		Press. (PSI)		Job Description / Remarks
				N2	CSG.	Tdg		
	1700							CALLED FOR JOB
	2030							ARRIVE ON LOCATION
	2045							PRE-JOB SAFETY MEETING
	2100							SPOT EQUIPMENT
								RIG RUNNING CASING
	2140							CASING ON BOTTOM, CIRCULATE W/ RIG
					2500			PRESSURE TEST
	2253	6.5	0-144		0-350			START LEAD 270 SKS (MIDCON PP) MIXED @ 11.3#
	2315	6.5	0-29		175-275			START TAIL 125 SKS (PREM PLUS) MIXED @ 14.8#
	2320	6.5	173.0		100			END CEMENT
	2321							WASH LINES /// DROP PLUG
	2325	4.0	0-69		25			START DISPLACEMENT
	2333	5.0	32.0		200			CAUGHT CEMENT
	2337	3.0	59.0		500-400			SLOW RATE
	2344	2.5	69.0		1550			LAND PLUG /// FLOAT HELD
	2346							END JOB
					850			PRESSURE BEFORE LANDING PLUG
								CIRCULATED CEMENT

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HAUBURTON JOB SUMMARY

SALES ORDER NUMBER 4147166	TICKET DATE 01/05/06
BDA / STATE 4147166	COUNTY KEARNY
PSL DEPARTMENT Cement	CUSTOMER REP / PHONE 30 BILL CUSTARD 405-313-8750
SAP BOMB NUMBER 7523	Cement Production Casing
HES FACILITY (CLOSEST TO WELL SITE) LIBERAL, KS	

REGION Central Operations	MVA / COUNTRY Mid Continent/USA
MBU ID / EMPL # MCIL 0110 / 198516	H.E.S. EMPLOYEE NAME JASON CLEMENS
LOCATION LIBERAL	COMPANY XTO ENERGY INC
TICKET AMOUNT \$15,054.00	WELL TYPE 01 Oil
WELL LOCATION LAKIN	DEPARTMENT ZJ
LEASE NAME MASONIC HOME	Well No. -2R-3
	SEC / TWP / RNS 35 - 25S - 36W

HES EMP NAME / EMP # / (EXPOSURE HOURS)	HRS	HRS	HRS	HRS
Clemens, A 198618	3.0			
Arnett, J 228867	3.0			
Baray, V 242219	3.0			
MILBOURN 321935	3.0			

H.E.S. UNIT #S / (R / T MILES)	R / T MILES	R / T MILES	R / T MILES	R / T MILES
10547690	140			
10251403	140			
10011406-10011591	70			
10010749-10011590	70			

Form. Name _____ Type: _____
 Form. Thickness _____ From _____ To _____
 Packer Type _____ Set At _____
 Bottom Hole Temp. _____ Pressure _____
 Retainer Depth _____ Total Depth _____

Date	Called Out	On Location	Job Started	Job Completed
	1/5/2006	1/5/2006	1/5/2006	1/5/2006
Time	1700	2100	2248	2346

Tools and Accessories

Type and Size	Qty	Make
Float Collar		H
Float Shoe		O
Centralizers	10	W
Top Plug	1	C
HEAD	1	H O
Limit clamp	1	O
Weld-A	1	W
Guide Shoe	1	C
BTM PLUG		O

Well Data

	New/Used	Weight	Size	Grade	From	To	Max. Allow
Casing	NEW	15.5#	5 1/2"		0	3,024	
Liner							
Liner							
Tubing							
Drill Pipe							
Open Hole			7 7/8"				
Perforations							Shots/Ft.
Perforations							
Perforations							

Materials

Mud Type	Density	Lb/Gal
Disp. Fluid	Density	Lb/Gal
Prop. Type	Size	Lb
Prop. Type	Size	Lb
Acid Type	Gal.	%
Acid Type	Gal.	%
Surfactant	Gal.	In
NE Agent	Gal.	In
Fluid Loss	Gal/Lb	In
Gelling Agent	Gal/Lb	In
Fric. Red.	Gal/Lb	In
Breaker	Gal/Lb	In
Blocking Agent	Gal/Lb	
Perfpac Balls	Qty.	
Other		
Other		
Other		
Other		

Hours On Location		Operating Hours		Description of Job
Date	Hours	Date	Hours	
1/5	3.0	1/5	1.0	Cement Production Casing
Total	3.0	Total	1.0	

Ordered	Hydraulic Horsepower Avail.	Used
Treating	Average Rates in BPM Disp.	Overall
Feet 31	Cement Left in Pipe Reason	SHOE JOINT

Cement Data

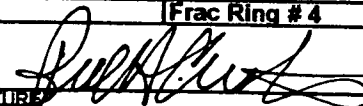
Stage	Sacks	Cement	Bulk/Sks	Additives	W/Rq.	Yield	Lbs/Gal
1	270	MIDCON II PF		1% FWCA - 1/2 # FLOCELE	18.59	3.00	11.30
2	125	PREM PLUS		1/4# FLOCELE - .5% HALAD-322	6.30	1.32	14.80
3							
4							

Summary

Circulating	Displacement	Preflush:	BBI	Type:
Breakdown	MAXIMUM	Load & Bkdn:	Gal - BBI	Pad: Bbl - Gal
Lost Returns -)	Lost Returns -)	Excess /Return	BBI	Calc. Disp Bbl
Cmt Rtrn#Bbl	Actual TOC	Calc. TOC:		Actual Disp.
Average	Frac. Gradient	Treatment:	Gal - BBI	Disp: Bbl
Shut In: Instant	5 Min. 15 Min.	Cement Slurry	BBI	
		Total Volume	BBI	

Frac Ring #1 _____ Frac Ring #2 _____ Frac Ring #3 _____ Frac Ring #4 _____

THE INFORMATION STATED HEREIN IS CORRECT
 CUSTOMER REPRESENTATIVE _____

SIGNATURE: 

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