

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 # KLN 7146
Name: Cheyenne Oil Service, Inc.
Address: P.O. Box 384
City/State/Zip: Ness City, KS 67560
Purchaser: N/A
Operator Contact Person: Bruce Franklin
Phone: (785) 391 2237
Contractor: Name: Cheyenne Well Service, Inc.
License: KLN 6454
Wellsite Geologist: None

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: Trans Pacific Oil Corporation
Well Name: #1-36 Briggs OWWO
Original Comp. Date: 3/21/96 Original Total Depth: 4400'
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back 2000' Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
11/7/00 N/A Aug 8, 06
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 063-21492-00-02
County: Gove
 NW NW NW Sec. 36 Twp. 14 S. R. 29 East West
330' feet from S / (circle one) Line of Section
330' feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Briggs OWWO Well #: 1-36
Field Name: Wildcat
Producing Formation: N/A
Elevation: Ground: 2592' Kelly Bushing: N/A
Total Depth: 2000' Plug Back Total Depth: 2000'
Amount of Surface Pipe Set and Cemented at 307' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 2059 Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ W0-DG-11/14/08 ^{5x cmt}

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: _____
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: [Signature]
Title: Owner Date: 8/9/06
Subscribed and sworn to before me this 11th day of August
20 06
Notary Public: Jennifer J Snyder
Date Commission Expires: June 10, 2009

KCC Office Use ONLY

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

RECEIVED

NOTARY PUBLIC - State of Kansas
JENNIFER J. SNYDER
My Appt. Exp. 06/10/09

AUG 14 2006
KCC WICHITA

Operator Name: Cheyenne Oil Service, Inc. Lease Name: Briggs OWWO Well #: 1-36
 Sec. 36 Twp. 14 S. R. 29 East West County: Gove

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: <p style="text-align: center;">Casing already in hole</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Cedar Hills</td> <td>1660</td> <td>1800</td> </tr> </table>	Name	Top	Datum	Cedar Hills	1660	1800
Name	Top	Datum					
Cedar Hills	1660	1800					

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"	N/A	307'	SMD	180	N/A
Casing	5 1/2"	4 1/2"	N/A	4398'	SMD	155	400# Hulls
Tubing		2 3/8"	N/A	1642.94			

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
4	4 STF		

TUBING RECORD		Size	Set At	Packer At	Liner Run		
		2 3/8"	1642.94'	1642.94'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumerd Production, SWD or Enhr.			Producing Method				
N/A			<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) _____

RECEIVED
 AUG 14 2006
 KCC WICHITA