

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 5030
Name: Vess Oil Corporation
Address: 8100 E. 22nd Street N.
Bldg. 300
City/State/Zip Wichita, KS 67226

Purchaser: Genesis Crude Oil, LP
Operator Contact Person: W.R. Horigan

Phone (316) 682-1537
Contractor: Name: Express Well Services

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/Re-Entry: old well info as follows:

Operator: Galloway Drilling
Well Name: Anderson A-4 W
Comp. Date 10-30-81 Old Total Depth 4050

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 3840 PBSD
Commingled Docket No. _____
Dual Completion Docket No. _____
Other (SWD or Inj?) Docket No. _____

11/18/99 12/16/99
~~XXXX~~ Date Date Reached TD Completion Date

start

API NO. 15- 065-21476-0001
County Graham
NE NE NW Sec. 10 Twp. 10S Rge. 24 XX^E_W

4950 Feet from S (circle one) Line of Section
2970 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE SE NW or SW (circle one)

Lease Name Anderson A Well # 4

Field Name _____

Producing Formation Toronto & Lansing/Kansas City

Elevation: Ground _____ KB 2457

Total Depth 4050 PBSD 3840

Amount of Surface Pipe Set and Cemented at 224 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2099 Feet

If Alternate II completion, cement circulated from 2099

feet depth to 0 w/ 450 sx cmt.

Drilling Fluid Management Plan OWWO, 1-24-00
(Data must be collected from the Reserve Pit) WR

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 Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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.

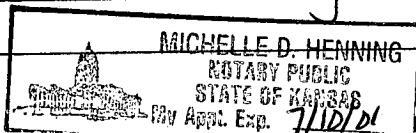
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature WR Horigan
Title Vice President - Operations Date 1/5/00

Subscribed and sworn to before me this _____ day of January,
XXXX 2000.

Notary Public Michelle D Henning

Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

Operator Name Vess Oil Corporation Lease Name Anderson A Well # 4
 County Graham
 Sec. 10 Twp. 10S Rge. 24 ~~XXXXX~~
 East West

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 log.

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:
 workover

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

CASING RECORD <input 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		228		175	
production	7-7/8	4-1/2		4048		150	

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	3840 3840	common	1	100% cement on top of sand on top of packer, stuck at 3890'

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth
2	3859-69	125 gal 15% HCC all zones
2	3824-27	
2	3771-74	

TUBING RECORD Size 2-3/8 Set At 3834 Packer At none Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 12/20/99 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 70 Bbls. Gas 0 Mcf Water 0 Bbls. Gas-Oil Ratio Gravity

Disposition of Gas: Vented Sold Used on Lease (if vented, submit ACO-10)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval 3771 to 3869 OA