

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 33259
 Name: Arrow Oil & Gas, Inc.
 Address: P.O. Box 862
 City/State/Zip: Norman, OK 73070
 Purchaser: _____
 Operator Contact Person: Marshall Brackin
 Phone: (405) 364-3618
 Contractor: Name: Murfin Drilling Company, Inc.
 License: 30606
 Wellsite Geologist: Greg Wilson
 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: _____
 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. _____
 7-24-03 8-1-03
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 071-20764-00-00
 County: Greeley
 _____ SE _____ SW Sec. 13 Twp. 16 S. R. 42 East West
600' feet from S / N (circle one) Line of Section
1980' feet from E W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Young Cattle Well #: 1
 Field Name: NW Tribune Prospect
 Producing Formation: _____
 Elevation: Ground: 3779' Kelly Bushing: 3789'
 Total Depth: 5220' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 8 jts @ 347' 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.

RECEIVED
SEP 22 2003
KCC WICHITA

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.: _____

Ref. on 9-24-03

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: Marshall Brackin
 Title: President Date: September 10, 2003
 Subscribed and sworn to before me this 10th day of September

2003
 NOTARY PUBLIC
 OFFICIAL SEAL
 Linda K. Clark
 Commission Expires Apr. 28, 2004
Linda K. Clark
Cleveland County
September 28, 2004

KCC Office Use ONLY

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

Operator Name: Arrow Oil & Gas, Inc. Lease Name: Young Cattle Well #: 1
 Sec. 13 Twp. 16 S. R. 42 East West County: Greeley

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 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:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Upper Morrow	5069'	1280'
Lower Morrow	5078'	1289'
Mississippi	5170'	1381'

Compensated Neutron Log; Array Induction
 Electric Log; Micro-Resistivity Log

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	# Sacs Used	Type and Percent Additives
Surface Csg	12 1/4"	8 5/8"	23 lb.	347'	Regular	250	3% CaCl

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
---------------	------	--------	-----------	--

Date of First, Resumerd Production, SWD or Enhr.	Producing Method <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 Vented Sold Used on Lease *(If vented, Submit ACO-18.)*

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

Other (Specify) _____

Production Interval _____

15-071-20764-00-00

ORIGINAL

TREATMENT REPORT



Customer ID	Date
Customer <i>ARROW OIL & GAS</i>	<i>8-1-03</i>
Lease <i>YOUNG CATTLE</i>	Lease No.
	Well # <i>1</i>

Field Order # <i>6582</i>	Station <i>LIBERAL</i>	Casing	Depth <i>2688</i>	County <i>GREELEY</i>	State <i>KS</i>
Type Job <i>PIA New well</i>			Formation	Legal Description <i>13-16-42W</i>	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size <i>D.P.</i>	Tubing Size	Shots/Ft <i>PLUGS</i>		Acid <i>60/40 P02 6% GEL</i>		RATE	PRESS	ISIP
Depth <i>2688</i>	Depth	From <i>2688</i>	To	Pre Pad		Max		5 Min.
Volume	Volume	From <i>1800</i>	To	Pad		Min		10 Min.
Max Press	Max Press	From <i>800</i>	To	Frac		Avg		15 Min.
Well Connection <i>D.P.</i>	Annulus Vol.	From <i>380</i>	To			HHP Used		Annulus Pressure
Plug Depth <i>2688</i>	Packer Depth	From <i>40</i>	To <i>Surface</i>	Flush		Gas Volume		Total Load

Customer Representative <i>Jim RENNIE</i>	Station Manager <i>Dick MORRIS</i>	Treater <i>Shawn FREDERICK</i>
--	---------------------------------------	-----------------------------------

Service Units	<i>28</i>	<i>108</i>	<i>38</i>	<i>72</i>				
---------------	-----------	------------	-----------	-----------	--	--	--	--

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>0830</i>					RECEIVED
<i>0835</i>					SEP 22 2003
<i>0846</i>					KCC WICHITA
<i>0900</i>					<i>Rig up P.T.</i>
<i>—</i>					<i>Through Cir Hook lines to D.P.</i>
<i>0905</i>	<i>150</i>		<i>10</i>	<i>3.5</i>	<i>1st PLUG @ 2688</i>
<i>0910</i>	<i>∅</i>		<i>14</i>	<i>3.5</i>	<i>Pump 10 BBLs H₂O</i>
<i>0922</i>	<i>∅</i>		<i>4</i>	<i>2</i>	<i>Pump 50 SAS 60/40 P02 @ 13.2#</i>
<i>0925</i>	<i>∅</i>		<i>30</i>	<i>6</i>	<i>Pump 4 BBLs H₂O</i>
<i>0930</i>					<i>Pump 30 BBLs MUD</i>
<i>1000</i>					<i>Shut Down / Pull D.P.</i>
<i>—</i>					<i>D.P. @ 1800</i>
<i>1001</i>	<i>100</i>		<i>10</i>	<i>3.5</i>	<i>2nd PLUG</i>
<i>1006</i>	<i>∅</i>		<i>14</i>	<i>3.5</i>	<i>Pump 10 BBLs H₂O</i>
<i>1011</i>	<i>∅</i>		<i>4</i>	<i>2</i>	<i>Pump 50 SAS 60/40 P02 @ 13.2#</i>
<i>1015</i>	<i>∅</i>		<i>20</i>	<i>6</i>	<i>Pump 4 BBLs H₂O</i>
<i>1020</i>					<i>Pump 20 BBLs MUD</i>
<i>1053</i>					<i>Shut Down / Pull D.P.</i>
<i>—</i>					<i>D.P. @ 800</i>
<i>1055</i>	<i>75</i>		<i>10</i>	<i>3.5</i>	<i>3rd PLUG</i>
<i>1059</i>	<i>∅</i>		<i>14</i>	<i>3.5</i>	<i>Pump 10 BBLs H₂O</i>
					<i>Pump 50 SAS 60/40 P02 @ 13.2#</i>

10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • Phone (620) 672-1201 • Fax (620) 672-5383

TREATMENT REPORT



Customer ID		Date	
Customer			
Lease		Lease No.	Well #
Field Order #	Station	Casing	Depth
		County	State

Type Job	Formation	Legal Description
----------	-----------	-------------------

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth	Depth	From	To	Pre Pad		Max		5 Min.
Volume	Volume	From	To	Pad		Min		10 Min.
Max Press	Max Press	From	To	Frac		Avg		15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To	Flush		Gas Volume		Total Load

Customer Representative	Station Manager	Treater
-------------------------	-----------------	---------

Service Units								
---------------	--	--	--	--	--	--	--	--

Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
-					JOB LOG CONTINUED
1103	Ø		4	2	Pump 4 Bbls H ₂ O
1104					SHUT DOWN / Pull D.P
1122					D.P @ 380
-					4 th Plug
1124	Ø		10	3	Pump 10 Bbls H ₂ O
1126	Ø		8	3	Pump 30 sks 60/40 Poz @ 13.2"
1130	Ø		4	2	Pump 4 Bbls H ₂ O
1133					SHUT DOWN / Pull D.P
1235					D.P @ 40 ft
1241	Ø		10	3	Pump 10 Bbls H ₂ O
1244	Ø		2.5	2	Pump 10 sks 60/40 poz @ 13.2"
1246					SHUT DOWN
1249	Ø		8	2	PLUG RAT/mouse 25 sks 60/40 Poz
1257					SHUT DOWN / WASH Lines B.P.T
1330					JOB Complete