

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

ORIGINAL

API NO. 15- 051-25165-0000

County Ellis

75 E of SE-SW-NW Sec. 32 Twp. 11S Rge. 17 X E

2970 Feet from S/N (circle one) Line of Section

4215 Feet from EW (circle one) Line of Section

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

Lease Name C.M. Hadley Well # 7

Field Name Bemis-Shuttles

Producing Formation _____

Elevation: Ground 2040 KB 2045

Total Depth 3618' PBTD _____

Amount of Surface Pipe Set and Cemented at 210 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ SX cmt.

Drilling Fluid Management Plan PSA'd on 12-12-02
(Data must be collected from the Reserve Pit)

Chloride content 58,000 ppm Fluid volume 400 bbls

Dewatering method used Allow to dry and backfill

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

Operator: License # 6509

Name: Cla-Mar Oil Company **KCC WICHITA**

Address P.O. Box 1197

City/State/Zip Hays, Kansas 67601

Purchaser: _____

Operator Contact Person: Jim D. Clark

Phone (785) 625-3863

Contractor: Name: Vonfeldt Drilling, Inc.

License: 9431

Wellsite Geologist: Randy Kilian

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:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

11-4-02 11-11-02 11-11-02
Spud Date Date Reached TD Completion Date

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 Jim D. Clark
Title Owner Date 12-4-02

Subscribed and sworn to before me this 4 day of December,
2002

Notary Public Trudi McFarren

Date Commission Expires _____
NOTARY PUBLIC - State of Kansas
TRUDI McFARREN
My Appl. Exp. 3/26/05

K.C.C. OFFICE USE ONLY
F NO Letter of Confidentiality Attached
C YES Wireline Log Received
C YES Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

Operator Name Clay-Mar Oil Company Lease Name C.M. Hadley Well # 7
 Sec. 32 Twp. 11 Rge. 17 East County Ellis
 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: Dual Comp Porosity
 Dual Induction
 Microresistivity
 Sonic

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Anh	1279	+766
Base	1316	-729
Topeka	3006	-961
Heeb Sh	3235	-1190
Toronto	3256	-1211
Lansing	3276	-1231
B Kc	3510	-1465
Arb	3544	-1499
TD	3619	-1574

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		8 5/8"	24#	210	com	140	

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	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: _____

ALLIED CEMENTING CO., INC.

11456

Federal Tax I.D.

ORIGINAL

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT

Russell

15-051-25165-0000

DATE <u>11-4-02</u>	SFC. <u>32</u>	TWP. <u>11</u>	RANGE <u>17</u>	CALLED OUT <u>5:00pm</u>	ON LOCATION <u>7:00pm</u>	JOB START	JOB FINISH <u>8:00pm</u>
LEASE <u>Hadley</u>	WELL.# <u>7</u>	LOCATION <u>Toddan-Bulter Rd. SW</u>			COUNTY <u>Ellis</u>	STATE <u>Ka</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Vanfeldt Drls

TYPE OF JOB SURFACE

HOLE SIZE 12 1/2 T.D.

CASING SIZE 8 5/8 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 1.5

PERFS.

DISPLACEMENT 12.4 bbls

EQUIPMENT

PUMP TRUCK CEMENTER B. H

177 HELPER DURIN

BULK TRUCK

160 DRIVER Paul

BULK TRUCK

DRIVER

OWNER

CEMENT AMOUNT ORDERED 140 lb Com 3-2

COMMON	<u>140</u>	@	<u>665</u>	<u>931.00</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>10.00</u>	<u>30.00</u>
CHLORIDE	<u>5</u>	@	<u>30.00</u>	<u>150.00</u>
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>140</u>	@	<u>1.00</u>	<u>140.00</u>
MILEAGE	<u>4.5</u>	@	<u>30.00</u>	<u>135.00</u>

RECEIVED

DEC 06 2002

KCC WICHITA SERVICE

TOTAL 1433.00

REMARKS:

Rgn SW of P-5

Sec 210

Cemt. of 140 lb Com 3-2

Pump plug of 12.4 bbls ✓

Cement Dis Circ.

CHARGE TO: Clamare Oil Comp.

STREET P.O. Box 1197

CITY HAYS STATE Ks ZIP 67601

DEPTH OF JOB

PUMP TRUCK CHARGE 1 520.00

EXTRA FOOTAGE @

MILEAGE 30 @ 3.00 90.00

PLUG 10 5/8 Wood @ 4.50 45.00

TOTAL 655.00

FLOAT EQUIPMENT

@		
@		
@		
@		
@		

TOTAL

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment
and furnish cementer and helper to assist owner or

ALLIED CEMENTING CO., INC. 11570

Federal Tax I.I

ORIGINAL

REMIT TO: P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

K

15051251650000

DATE <u>11-11-02</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
<u>11-11-02</u>					<u>6:30 PM</u>	<u>7:00 AM</u>	
LEASE <u>HANEY</u>	WELL # <u>7</u>	LOCATION <u>TOWLAN C BUCKEYE RD SW</u>			COUNTY <u>ELLIS</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR VONFELDT DRIG
 TYPE OF JOB DTA
 HOLE SIZE 7 7/8 T.D. 3535
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER _____
 CEMENT AMOUNT ORDERED 275 60/40 690 GEL
1/4 LB FLO SEAL/SIL

COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____

EQUIPMENT
 PUMP TRUCK CEMENTER MARK
 # 345 HELPER CLEN
 BULK TRUCK _____
 # 362 DRIVER SHANE
 BULK TRUCK _____
 # _____ DRIVER _____

TOTAL _____

REMARKS:

75 SILS @ 3535
75 SILS @ 1325
100 SILS @ 725
40 SILS @ 265
10 SILS @ 40
15 SILS @ R.H.
10 SILS @ M.H.

SERVICE
 DEPTH OF JOB _____
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG 8 5/8 DRYHOLE @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

CHARGE TO: CLA HANEY OTC
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE Wong Bredz

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Doug Bredz
 PRINTED NAME _____

