

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

Operator: License # 31691

Name: Coral Coast Petroleum L.C.

Address 200 E. 1st - #001

City/State/Zip Wichita, KS 67202

Purchaser: _____

Operator Contact Person: Dan Reynolds

Phone (316) 269-1233

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Dan Reynolds

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 _____ PBTB

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

04-20-99 05-03-99 05-04-99
Spud Date Date Reached TD Completion Date

API NO. 15- 033-21008 0000

County Comanche County, Kansas

N/2 - NE - _____ Sec. 25 Twp. 33 Rge. 20 XX ^E _W

660 Feet from S(N) (circle one) Line of Section

1520 Feet from E(W) (circle one) Line of Section

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

Lease Name Todd Well # 1

Field Name Wildcat

Producing Formation NONE

Elevation: Ground 1896' KB 1909'

Total Depth 6150' PBTB 6000'

Amount of Surface Pipe Set and Cemented at 625 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.

Drilling Fluid Management Plan PTA 9-7-99 UC
(Data must be collected from the Reserve Pit)

Chloride content 8,000 ppm Fluid volume 1,400 bbls

Dewatering method used Hauled to disposal

Location of fluid disposal if hauled offsite: _____

Operator Name KRW Oil & Gas

Lease Name Harmon License No. 5993

NE Quarter Sec. 11 Twp. 33 S Rng. 20 (N)

County Comanche Docket No. CO 98329

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 Daniel M. Reynolds

Title Managing Member Date 8-10-99

Subscribed and sworn to before me this 10th day of August, 19 99.

Notary Public Patricia S. Armstrong

Date Commission Expires _____

RECEIVED
PATRICIA S. ARMSTRONG
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 1-4-2000

AUG 27 1999

CONSERVATION DIVISION
WICHITA, KS

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other (Specify)

Form ACO-1 (7-91)

X

Operator Name Coral Coast Petroleum L.C.

Lease Name Todd Well # 1

Sec. 25 Twp. 33 Rge. 20
 East
 West

County Comanche County, Kansas

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:

Name	Formation (Top), Depth and Datums		Sample Datum
	Top	Datum	
Anhydrite	920	989	
Heebner	4247	-2338	
Lansing	4440	-2531	
Stark	4815	-2906	
Pawnee	5057	-3148	
Mississippi	5214	-3305	
Viola	6080	-4171	

Dual Induction- Comp. Neutron Density

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"	24#	625'	65/35 Class A	200 100	6%gel 3%cc 3%cc 2%gel

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(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, SMD 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	

DATA
N-A

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: _____

ORIGINAL

DST #1 Marmaton & Pawnee, 4975-5082'; 30-30-30-30; Rec. 240' of gas and 180' of gas cut mud.
HYD 2587-2576; FP 144-144, 178-178; SIP 1537-1504.

DST #2 Mississippi, 5150-5220'; 30-45-45-60; Rec. 1425' gas in pipe and 60' gas cut mud. HYD
2557-2587; FP 33-31, 26-29; SIP 798-865; 122 degrees.

DST #3 Viola, 6072-6085'; 10-10-5; Rec. 5' of mud.
HYD 2965-2904; FP 16-16, 27-16; SIP 16; 126 degrees.

DST #4 Viola, 6074-6116, 30-45-45-60,
Recovered 120' slightly mud cut water and 1280' of salt water, Chlorides 110,000ppm, Hyd.
3016-2952, FP. 57-370; 386-662 SIP. 2289-2289. 145 degrees F.

RECEIVED
UTILES CORPORATION - MISSOURI

AUG 27 1999

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., INC

Federal Tax I.D.#

9623
ORIGINAL

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

SERVICE POINT

Medicine Lodge

DATE 4-20-99	SEC. 25	TWP. 33	RANGE 2	CALLED OUT 12:50 pm	ON LOCATION 2:00 pm	JOB START 5:15 am	JOB FINISH 6:30 pm
LEASE 7-11	WELL# 1	LOCATION Jet South of Oklawaha			COUNTY Converse	STATE KS	
OLD OR NEW (Circle one)				7, 35, 45, 70			

CONTRACTOR Duke

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D.

CASING SIZE 5 1/2 x 24" DEPTH 120

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 600 MINIMUM 150

MEAS. LINE SHOE JOINT 42.05

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 38 1 1/2" fresh water

OWNER Coral Coast Petroleum

CEMENT

AMOUNT ORDERED

200 sa 15-35 + 36cc + kick seal

100 sa CLASS A + 36cc + 2% gel

COMMON @

POZMIX @

GEL @

CHLORIDE @

HANDLING @

MILEAGE @

TOTAL

EQUIPMENT

PUMP TRUCK CEMENTER Carl Dalding

21-265 HELPER Alvin

BULK TRUCK

214-314 DRIVER Mark Dlugait

BULK TRUCK

DRIVER

REMARKS:

SERVICE

Pipe on bottom, break circulation

July 20th fresh water, mix 200 sa ALK

100 sa A 312 cement in, stop pumps.

Switch valves + Release plug.

Displace with 38 BBL fresh water.

Plug plug - hot in

Cement did circulate. ✓

DEPTH OF JOB 120

PUMP TRUCK CHARGE

EXTRA FOOTAGE @

MILEAGE @

PLUG rubber @

TOTAL

CHARGE TO: Coral Coast Petroleum

STREET

CITY STATE KS ZIP

FLOAT EQUIPMENT

1- Baffle Plate @

1- Basket @

TOTAL

To Allied Cementing Co., Inc. CONSERVATION DIVISION
MICHIGAN, KS

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.

TAX

TOTAL CHARGE

DISCOUNT IF PAID IN 30 DAYS

SIGNATURE Kenneth K. McGuire

KENNETH K. MCGUIRE
PRINTED NAME

AUG 21 1999

ALLIED CEMENTING CO., INC.

Federal Tax I.

1881
ORIGINAL

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

SERVICE POINT:

Medicine Lodge

DATE <u>5-4-99</u>	SEC. <u>25</u>	TWP. <u>2</u>	RANGE <u>20 W</u>	CALLED OUT <u>6:00 am</u>	ON LOCATION <u>9:00 am</u>	JOB START <u>10:25 am</u>	JOB FINISH <u>12:15 pm</u>
LEASE <u>Tdd</u>	WELL # <u>1</u>	LOCATION <u>Protection Rd 1 1/2 S</u>			COUNTY <u>Comanche</u>	STATE <u>KC</u>	
OLD OR NEW (Circle one)			<u>3 1/2 5/8</u>				

CONTRACTOR Duke Big

TYPE OF JOB Retary Plug

HOLE SIZE 7 1/2 T.D. 6150

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 x 11.11 DEPTH 900

TOOL _____ DEPTH _____

PRES. MAX 150 MINIMUM 25

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Coral Coast Petroleum

CEMENT AMOUNT ORDERED 135 sk 60:40:1

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER Coral Bldg

261-265 HELPER Silva

BULK TRUCK

301 DRIVER Mark Bruggard

BULK TRUCK

_____ DRIVER _____

TOTAL _____

REMARKS:

SERVICE

2mp 50 sk 900'

50 sk 620'

10 sk 40'

10 sk 11.11 Hole

15 sk Rat Hole

DEPTH OF JOB 900'

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG wooden _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: Coral Coast Petroleum

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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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.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Kenneth McGuire

Kenneth McGuire
PRINTED NAME

AUG 07 1999