

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

Operator: License # 5144
Name: Mull Drilling Company, Inc.
Address P.O. Box 2758
City/State/Zip Wichita, KS 67201
Purchaser: N/A

Operator Contact Person: Mark A. Shreve
Phone (316) 264-6366

Contractor: Name: _____
License: OCT 17 2003

Wellsite Geologist: KCG WICHITA

Designate Type of Completion
 New Well Re-Entry Workover

Oil SMD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, MSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator: Mull Drilling Company, Inc.
Well Name: Terwilliger North East Unit
Comp. Date #5 9-29-77 Old Total Depth 4600

Deepening Re-perf. Conv. to Inj/SMD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SMD or Inj?) Docket No. E-27,690

9-29-03 9-29-03 10-7-03
Spud Date Date Reached TD Completion Date

API NO. 15- 101-20,246-00-02
County Lane
-NW -NE -NE Sec. 1 Twp. 17S Rge. 29 X E

330 Feet from SW (circle one) Line of Section
990 Feet from E (circle one) Line of Section

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

Lease Name Terwilliger North Well # 5
East Unit

Field Name Terwilliger East

Producing Formation Marmaton

Elevation: Ground 2785 KB _____

Total Depth 4600 PBTB _____

Amount of Surface Pipe Set and Cemented at 323 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 cnt.

Drilling Fluid Management Plan Workover 11.3.03
(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 Rng. _____ E/W
County _____ Docket No. _____

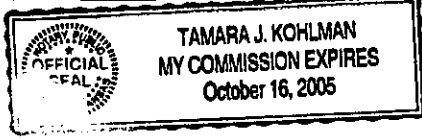
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side 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 Nancy J. Stever
Title Sr. Eng. & Prod. Technician Date 10-16-03

Subscribed and sworn to before me this 16th day of October,
2003.

Notary Public Tamara J. Kohlman
Date Commission Expires October 16, 2005



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

Operator Name Mull Drilling Company, Inc.

Lease Name TNEU

Well # 5

Sec. 1 Twp. 17 Rge. 29
 East
 West

County Lane

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:

Log Formation (Top), Depth and Datums 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

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

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 2 7/8	Set At 4313	Packer At 4313' & 3976'	Liner Run <input type="checkbox"/> Yes <input checked="" 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. 0	Gas Mcf 0	Water Bbls. 0	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) _____