

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

ORIGINAL

Operator: License # 32321

Name: Cleary Exploration, LLC

Address 5821 NW Grand Blvd - Suite A

City/State/Zip Oklahoma City, OK 73118

Purchaser: _____

Operator Contact Person: Ron Mercer

Phone (405) 848-5019

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Rick Holcomb

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:

KCC

Operator: _____

NOV 17

Well Name: _____

Comp. Date _____ Old Total Depth _____

CONFIDENTIAL

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

08-31-98 09-09-98 09-10-98
Spud Date Date Reached TD Completion Date

API NO. 15- 077-21359 0000

County Harper County, Kansas

C- NE - SE - Sec. 31 Twp. 33 Rge. 9 XXX ^E _W

1980 Feet from (S/N) (circle one) Line of Section

660 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 Dorothy Brown Trust Well # 1-31

Field Name CONFIDENTIAL

Producing Formation _____

Elevation: Ground 1320 KB 1328

Total Depth 4592 PBDT 4100

Amount of Surface Pipe Set and Cemented at 328 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 P4A, 12-11-98 U.C.
(Data must be collected from the Reserve Pit)

Chloride content 78,000 ppm Fluid volume 800 bbls

Dewatering method used RELEASED

Location of fluid disposal if hauled offsite: MAY 06 2000

Operator Name _____

FROM CONFIDENTIAL

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 _____

Title Operations Manager Date 09/28/98

Subscribed and sworn to before me this 28th day of September, 1998.

Notary Public Maryann

Date Commission Expires 4-8-2001

K.C.C. OFFICE USE ONLY		
F	<input checked="" 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"/> NGPA
		<input type="checkbox"/> Other
		(Specify)

Operator Name Cleary Exploration, LLC

Lease Name Dorothy Brown Trust Well # J-31

Sec. 31 Twp. 33 Rge. 9
 East
 West

County Harper 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.)

Log Formation (Top), Depth and Datums Sample
 Name Top Datum
 Tonkawa/Stalnaker 3820' (-2492)
 Mississippian 4526' (-3198)

List All E.Logs Run:
 Porosity
 Density
 Microlog

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	12-1/4"	8-5/8"	23#	328'	60/40 Poz	200	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 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 Yes No

Date of First, Resumed Production, SWD or Inj. P&A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>N-A</u>				

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. 9729

Federal Tax I.D.# 48-0727860

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

ORIGINAL

SERVICE POINT: Med. 6006, Ks

DATE: <u>9-10-98</u>	SEC: <u>31</u>	TWP: <u>33s</u>	RANGE: <u>9W</u>	CALLED OUT: <u>8:00 PM</u>	ON LOCATION: <u>12:40 AM</u>	JOB START: <u>1:45 AM</u>	JOB FINISH: <u>4:30 AM</u>
DOROTHY LEASE <u>BROWN</u>		WELL #: <u>1-31</u>	LOCATION: <u>HAZELTON + 14 Hwy 6 N/E</u>		COUNTY: <u>HASKER</u>	STATE: <u>KANSAS</u>	
OLD OR NEW (Circle one)			<u>E, S, 4s</u>				

CONTRACTOR: DUKE DRILL #1 OWNER: CLEARLY EXPLORATION, LLC
 TYPE OF JOB: KOTAHY AUB
 HOLE SIZE: 178" T.D.: 4592' CEMENT AMOUNT ORDERED: 155 x 60.40.4
 CASING SIZE: 878" DEPTH: 328'

TUBING SIZE: _____ DEPTH: _____
 DRILL PIPE: 4 1/2" DEPTH: _____
 TOOL: _____ DEPTH: _____

PRES. MAX: _____ MINIMUM: _____ COMMON: 93 @ 6.25 = 590.55
 MEAS. LINE: _____ SHOE JOINT: KCC POZMIX: 67 @ 3.25 = 201.50
 CEMENT LEFT IN CSG.: _____ GEL: 15 @ 9.50 = 47.50
 PERFS.: _____ CHLORIDE: 19 @ _____ = _____
 DISPLACEMENT: _____

EQUIPMENT
 PUMP TRUCK CEMENTER: KEVIN CRUMBALDI
 # 233-302 HELPER: JUSTIN HART
 BULK TRUCK DRIVER: JOHN KELLEY
 # 259-314
 BULK TRUCK DRIVER: _____
 # _____

RECEIVED
 CONSERVATION DIVISION
 WICHITA, KANSAS
 NOV 17 1998
 HANDLING: 155 @ 1.05 = 162.75
 MILEAGE: 155 x 25 @ .04 = 155.00
 RELEASED
 TOTAL \$ 1127.30

REMARKS: _____ FROM CONFIDENTIAL SERVICE
 35x @ 1400'
 35x @ 900'
 35x @ 350'
 25x @ 60'
 15x - RAT HOLE
 10x - MOUSE HOLE
 DEPTH OF JOB: 1400'
 PUMP TRUCK CHARGE: 470.00
 EXTRA FOOTAGE: @ _____
 MILEAGE: 25 @ 2.85 = 71.25
 PLUG: @ _____
 TOTAL \$ 541.25

CHARGE TO: DUKE DRILL Co.
 STREET: P.O. BOX 323
 CITY: GREAT BEND STATE: KANSAS ZIP: 671520

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.

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

SIGNATURE: [Signature]

Mike Godfrey
 PRINTED NAME

ALLIED CEMENTING CO., INC. 9765

Federal Tax I.D.# 48-0727860

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

ORIGINAL

SERVICE POINT: med lake, ks

DATE <u>8-31-98</u>	SEC <u>3.3</u>	TWP <u>3.3</u>	RANGE <u>9w</u>	CALLED OUT <u>9:00 P.M.</u>	ON LOCATION <u>10:30 P.M.</u>	JOB START <u>2:00 A.M.</u>	JOB FINISH <u>3:15 A.M.</u>
LEASE <u>Brown Dorothy</u>	WELL# <u>1-31</u>	LOCATION <u>44 Cornwood</u>	CONFIDENTIAL		COUNTY <u>Harper</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Duke Drilling Co
 TYPE OF JOB Surface Casing
 HOLE SIZE 12 1/4 T.D. 329
 CASING SIZE 8 5/8 x 24 DEPTH 328
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 329
 TOOL _____ DEPTH _____
 PRES. MAX 200 MINIMUM 100
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. 15 By Request
 PERFS. _____
 DISPLACEMENT 20 Bbls Fresh H₂O

OWNER Clearly Explor
 CEMENT AMOUNT ORDERED 200 SXS CLASS A
60/40/3% CACL₂ + 2% GEL

EQUIPMENT
 PUMP TRUCK CEMENTER Larry Dreding
 # 343 HELPER Tustin Hart
 BULK TRUCK # 242 DRIVER John Kelley
 BULK TRUCK # _____ DRIVER _____

COMMON _____ @ KCC
 POZMIX _____ @ _____
 GEL _____ @ NOV 17
 CHLORIDE _____ @ **CONFIDENTIAL**
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____
 RELEASED _____ @ _____
 MAY 06 2000 TOTAL _____

REMARKS:
Pipe on Bottom - Break Circ
mix + Dump 200 SXS CLASS A +
60/40/3% CACL₂ + 2% GEL Release
Plug Pump + Displace 20 Bbls Fresh
H₂O. Stop Pump / Shut In
Cement line to surface

FROM CONFIDENTIAL SERVICE
 DEPTH OF JOB 328
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG wood _____ @ _____
 _____ @ _____
 _____ @ _____

CHARGE TO: Duke Drilling Co
 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.

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

SIGNATURE [Signature]

[Signature]
 PRINTED NAME _____