

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6006
Name: Molz Oil Co., Inc.
Address: 19159 SW Clairmont
City/State/Zip: Kiowa, Kansas 67070
Purchaser: _____
Operator Contact Person: Jim Molz

Phone: (620) 296-4558
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Gordon Keen

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

05-15-03 05-25-03 5.26.03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

P & A

RECEIVED
JUN 11 2003
KCC WICHITA
06-11-2003

API No. 15 - 007-22744-00-00
County: Barber County, Kansas
C-W/2 NW SW Sec. 2 Twp. 33 S. R. 10 East West

2120 feet from (S) N (circle one) Line of Section
330 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Jamie Well #: 1

Field Name: _____
Producing Formation: _____

Elevation: Ground: 1393' Kelly Bushing: 1402'
Total Depth: 4875' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 329 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 As per W 6-17-03
(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. R. _____ East West
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 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: _____
Title: _____ Date: 6-10-03
Subscribed and sworn to before me this 10th day of June

2003
Notary Public: Shy 57
Date Commission Expires: 5-14-07

SHERRY NICKELSON
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 5-14-07

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

Operator Name: Molz Oil Co., Inc. Lease Name: Jamie Well #: 1
 Sec. 2 Twp. 33 S. R. 10 East West County: Barber County, Kansas

JAN 13 1990
 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: <u>OIL, CNL/COL</u>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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	# Sacs Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	23#	329'	60/40 Poz	275	3%cc 2%gel

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		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
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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)
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Estimated Production Per 24 Hours	Oil Bbls:	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	Production Interval
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15-007-22744-00-00 ORIGINAL

TREATMENT REPORT



Customer ID		Date	
Customer MOLT OIL CO.		5-26-03	
Lease JAMIE	Lease No.	Well # 1	
Field Order # 6406	Station PRATT, KS	Casing	Depth
Type Job PTA-NW	Formation TD-4875'	County BARBER	State KS.
		Legal Description 2-33-10	

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid	RATE	PRESS	ISIP	
8 5/8				115 SK 60/40 P02				5 Min.
Depth 329	Depth	From	To	Base Pad 6% GEL	Max			10 Min.
Volume	Volume	From	To	Pad	Min			15 Min.
Max Press	Max Press	From	To	Frac	Avg			Annulus Pressure
Well Connection	Annulus Vol.	From	To		HHP Used			Total Load
Plug Depth	Packer Depth	From	To	Flush	Gas Volume			

Customer Representative C. POWELL	Station Manager A. TRY	Treater K. GORDLEY
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Service Units	107	27	36	70
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
1030					ON LOCATION
1300					1 st PLUG AT 640' w/40 SK. CEMENT BREAK CIRC.
			11.3	5	PUMP 40 SK. CEMENT
			6		PUMP 6 bbl H ₂ O
					2 nd PLUG AT 350' w/50 SK. CEMENT BREAK CIRC.
			14.2	5	PUMP 50 SK. CEMENT
			1.5	5	PUMP 1 1/2 bbl H ₂ O
					3 rd PLUG AT 40' w/10 SK. CEMENT BREAK CIRC.
			3	2	CIRC. CEMENT TO SURFACE ✓
1345			4	2	PLUG RAT HOLE w/15 SK. CEMENT
1400					JOB COMPLETE THANKS - KEVIN

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INVOICE NO.	Subject to Correction			FIELD ORDER	6406
Date	Lease	Well #	Legal		
5-26-03	JAMIE	1	2-33-10		
Customer ID	County	State	Station		
	BARBER	KS.	PTA, KS.		
MOLZ OIL CO.		Depth	Formation	Shoe Joint	
		Casing	Casing Depth	TD	Job Type
				4875	PTA-NW
		Customer Representative	Treater		
		G. ROACH	K. BORDLEY		
AFE Number	PO Number	Materials Received by <i>X Richard Ronek</i>			

CHARGE

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D203	115.511	60/40 PORT CEMENT				
C320	396.16	CEMENT GEL				
E107	115 SK.	CEMENT SEAL CHARGE				
E100	4.5 mile	UNITS	MILES			
E104	223.7	TONS	MILES			
R400	1 EA.	EA.	PUMP CHARGE			
<i>PRICE</i>				=	1833.54	

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



15-007-22744-00-00 CEMENTING LOG

STAGE NO.

ORIGINAL

Date 5-15-03 District Mad. Lodge Ticket No. 12393
 Company mod 2 oil Co. Rig 12393
 Lease Junie Well No. 1
 County Barber State KS
 Location Old 1160 + Hazell on 11K top Field 2-330-1000
1E 15 1/4 E 33rd

CASING DATA: PTA Squeeze
 Surface Intermediate Production Liner
 Size 8 5/8 Type _____ Weight 21.00 Collar _____

Casing Depths: Top 10.0 Bottom 324'

Drill Pipe: Size 1 1/2 Weight _____ Collars _____
 Open Hole: Size 12 1/4 T.D. 324 ft. P.B. to _____ ft.

CAPACITY FACTORS:

Casing: Bbbs/Lin. ft. 0.637 Lin. ft./Bbl. 15.70
 Open Holes: Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbbs/Lin. ft. 0.735 Lin. ft./Bbl. 13.60
 Bbbs/Lin. ft. _____ Lin. ft./Bbl. _____
 Perforations: From _____ ft. to _____ ft. Amt. _____

CEMENT DATA:

Spacer Type: _____
 Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

LEAD: Pump Time _____ hrs. Type 10:40:30 acc. t
2% gel Excess _____

Amt. 275 Skys Yield 1.26 ft³/sk Density 14.8 PPG _____

TAIL: Pump Time _____ hrs. Type _____
 Excess _____

Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG _____

WATER: Lead 6.51 gals/sk Tail _____ gals/sk Total 43 Bbbs _____

Pump Trucks Used #352 - Dave Tel: 6

Bulk Equip. #240 - Walter Harman

Float Equip: Manufacturer _____

Shoe: Type Torch Cut F Depth 329

Float: Type NONE Depth 313.95

Centralizers: Quantity _____ Plugs Top _____ Btm. _____

Stage Collars _____

Special Equip. Fresh H₂O

Disp. Fluid Type Fresh H₂O Amt. 20 Bbbs. Weight 8.4 PPG _____

Mud Type Native Weight 9.5 PPG _____

COMPANY REPRESENTATIVE Don White

CEMENTER Mike Rucker

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	
10:45						Pipe on bottom break circulation
10:45		150		60 bbl slurry	6 1/2	Start load cement 2755 lb @ 14.8 weight (C + 2% gel @ 14.8 weight)
11:00		100			4 1/2	Stop Pumps Release Pressure Start Displacement
11:10		250 shut in		20 bbl fresh	4 1/2	20 bbl Disp. Stop Pumps Shut in Leave 15' cement in pipe
						* Cement Dis. Circulate
						Circ. 45' to pit

FINAL DISP. PRESS: _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK Shut in BBLs THANK YOU