

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

API NO. 15- 007-22525-0001

Operator: License # 3273
Name: Herman L. Loeb
Address P. O. Box 524

City/State/Zip Lawrenceville, IL 62439

County Barber
SW NW Sec. 28 Twp. 33S Rge. 13 X W

Purchaser: _____
Operator Contact Person: George A. Payne
Phone (812) 853-3813

1910 Feet from S/N (circle one) Line of Section
3350 Feet from E/W (circle one) Line of Section

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

Contractor: Name: Clarke Corp
License: 5105
Wellsite Geologist: None

Lease Name McKee Well # 9
Field Name Medicine Lodge

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Producing Formation Elgin
Elevation: Ground 1660 ft KB 1671 ft

Total Depth 5,100 ft PBTD _____
Amount of Surface Pipe Set and Cemented at 403 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.

If Workover:
Operator: Herman L. Loeb
Well Name: McKee #9
Comp. Date 12-22-96 Old Total Depth 5100
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTD
 Conmingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

Drilling Fluid Management Plan Workover on 9.9.03
(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. _____

10.16.02 Oct 16, 2002
Spud Date Date Reached TD Completion Date

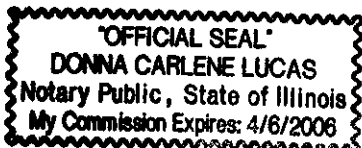
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side 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 George A. Payne
Title Petroleum Engineer Date 8/6/2003
Subscribed and sworn to before me this 14 day of AUGUST, 2003
Notary Public Donna Carlene Lucas
Date Commission Expires 4-6-06

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)



15-007-22525-00-01

SIDE TWO

ORIGINAL

Operator Name Herman L. Loeb

Lease Name McKee

Well # 9

Sec. 28 Twp. 33S Rge. 13
 East
 West

County Barber

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:
Logs filed with original completion ACO-1

Log Formation (Top), Depth and Datum Sample
Name Top Datum
Formation tops submitted with original completion ACO-1

RECEIVED
AUG 28 2003
8-28-03
KCC WICHITA

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	403	Light & Std	285	3% CaCl
Production	7 7/8"	5 1/2"	15.5	5,099	Midcon & EA2	275	Gilsonite

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	
	Cast iron bridge plug @ 3820'			
3	3708-3714'		None	

TUBING RECORD		Size	Set At	Packer At	Liner Run		
		2 3/8"	3,754	None		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SMD or Inj. Oct 16, 2002			Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Dil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio Gravity
			400				

Disposition of Gas: Vented Sold Used on Lease (if vented, submit ACO-18.)
METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____