

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5506
Name: WOOLSEY PETROLEUM CORPORATION
Address: 125 North Market, Suite 1000
City/State/Zip: Wichita, Kansas 67202
Purchaser: Bluestem Gas Marketing / Equiva
Operator Contact Person: Debra Clingan
Phone: (316) 267-4379 ext. 106
Contractor: Name: Clarke Well Service
License: 5105
Wellsite Geologist: None

API No. 15 - 007-22279-0002
County: BARBER
S2 NW NW Sec. 33 Twp. 33 S. R. 13 East West
990' FNL feet from (N) (circle one) Line of Section
660' FWL feet from (W) (circle one) Line of Section

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

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: SPRIGGS D Well #: 1
Field Name: Aetna (Snyderville)
Producing Formation: Snyderville
Elevation: Ground: 1717' Kelly Bushing: 1725'
Total Depth: 5100' Plug Back Total Depth: 4100'
Amount of Surface Pipe Set and Cemented at 375' 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 crnt.

If Workover/Re-entry: Old Well Info as follows:
Operator: Woolsey Petroleum Corporation
Well Name: Spriggs D-1
Original Comp. Date: 02/21/90 Original Total Depth: 5100'
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Acid/frac Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____
05/27/99 Acid 05/29/99
10/18/99 Frac 10/19/99
Recompletion Date 05/29/99 Recompletion Date

Drilling Fluid Management Plan REWORK 97H/a 8/29/00
(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.: _____

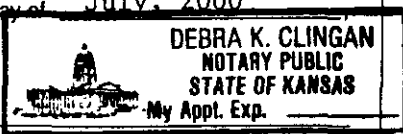
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: I. Wayne Woolsey
Title: President Date: July 31, 2000

Subscribed and sworn to before me this 31st day of July, 2000

Notary Public: Debra K. Clingan
Date Commission Expires: March 4, 2002



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

Operator Name: WOOLSEY PETROLEUM CORPORATION Lease Name: Spriggs D Well #: 1

Sec. 33 Twp. 33 S. R. 13 East West County: Barber

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 <i>(Attach Additional Sheets)</i> 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: none | <input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> 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 | # Sac's Used | Type and Percent Additives |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

| 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 <i>(Amount and Kind of Material Used)</i> | Depth |
|----------------|---|--|-------------|
| 2 | Snyderville perms at 3964'-3980' | 2000 gal 7.5% HCL acid | 3964'-3980' |
| | CIBP @ 4100' | 140,000# 70 qty nitrogen, 104 | same |
| 1 | 4690'-4700' + 4742'-4746' + 4746'-4754' | bbl gelled wtr, 6000# 20/40 & 7000# 12/20 sand | as above |
| 2 | 4754'-4760' | | |

| | | | | |
|---------------|-------------|--------|-----------|---|
| TUBING RECORD | Size | Set At | Packer At | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| | 2-3/8" 4.7# | 4073' | none | |

| | |
|--|--|
| Date of First, Resumerd Production, SWD or Enhr. 05/29/99 | Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) |
|--|--|

| | | | | | |
|-----------------------------------|------------------|----------------|------------------|------------------------|---------------|
| Estimated Production Per 24 Hours | Oil Bbls. 0.5 | Gas Mcf 465 | Water Bbls. 1 | Gas-Oil Ratio 930:1 | Gravity 48 |
|-----------------------------------|------------------|----------------|------------------|------------------------|---------------|

| | | |
|--|--|---------------------|
| Disposition of Gas | METHOD OF COMPLETION | Production Interval |
| <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Sumit ACO-18.)</i> | <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) | 3964'-3980' |