

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

Operator: License # 3882
Name: SAMUEL GARY JR. & ASSOCIATES, INC.
Address 1670 BROADWAY
SUITE 3300
City/State/Zip DENVER, CO 80202-4838

Purchaser: P G & E
Operator Contact Person: TOM FERTAL

Phone (303) 831-4673

Contractor: Name: Clarke Corporation
License: 5105

Wellsite Geologist: None

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/Re-Entry: Old well info as follows:

Operator: Samuel Gary Jr. & Associates, Inc.

Well Name: Brass 34-15

Comp. Date 11/14/97 Old Total Depth 6224'

Deepening Re-Perf. Conv. To Inj/SWD
 Plug Back 5530 PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

9-11-98 11-26-98
9/19/98
Date of START Date Reached TD Completion Date of
OF WORKOVER OF WORKOVER

API No. 15- 033-20943-0001

County Comanche

C - SW - SW - SE Sec. 34 Twp. 32S Rge. 19 X W

330 Feet from South Line of Section

2310 Feet from East Line of Section

Footages calculated from nearest outside section corner: SE

Lease Name Brass Well # 34-15

Field Name Colter West

Producing Formation Pawnee, Ft. Scott, Cherokee, & Mississippian

Elevation: Ground 1932 KB 1945

Total Depth 6224 PBTB 5530

Amount of Surface Pipe Set and Cemented at 661 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 REWORK JK 1-19-99
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid Volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite:

RELEASED

Operator Name _____

Lease Name MAR 28 2001

Quarter Sec. _____ Twp. _____ Rng. _____ W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this information shall be filed with the Kansas Corporation Commission, 130 South Market, Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-196 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 geological well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 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 an the statements herein are complete and correct to the best of my knowledge.

Signature Thomas Fertal

Title Senior Geologist Date Dec. 23, 1998

Subscribed and sworn to before me this 23 day of December.

Notary Public Judith D. Harmon

Date Commission Expires January 30, 1999

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) _____

15-033-20943-00-01

Operator Name Samuel Gary Jr. & Associates, Inc. Lease Name Brass Well # 34-15

Sec. 34 Twp. 32 S Rge. 19 East West County Comanche

Instructions: Show important tops and base of formation 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 (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum Name	<input type="checkbox"/> Sample Datum
Sample Sent to Geological Survey	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Tops shown on original ACO-1		
Cores Taken	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	RECEIVED STATE OPERATOR CONSERVATION CONSERVATION DIVISION Wichita, Kansas DEC 28 1998 12-28-98		
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No			
List all E. Logs Run:	Logs filed with original ACO-1 on Feb. 3, 1998 Photo Density - Neutron attached showing new perms				

RELEASED
MAR 28 2001
FROM CONFIDENTIAL

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
Conductor	26"	20"		42'	Redimix		
Surface	12 1/4"	8 5/8"	23#	661'	65/35 & A	325	CL A
Production	7 7/8"	5 1/2"	15.50	5995'	65/35	300	CL A

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	# Sacks Used	Type and Percent Additives
	Top	Bottom			
<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
		Amount	Kind of Material Used	
4	5844 - 5858	None,	CIBP set @ 5530' on 9-14-98 for recompl. (NO CEMENT SPOTTED)	
4	5138-42, 5157-62, 5167-69, 5173-76, 5194-5200, 5205-09, 5221-25, 5257-60, 5274-78, 5296-5300	4000 gals	15% HCL	
2	5108-16	1500 gals	17% DSFe	
2	4995-5008, 5021-29.	3000 gals	15% DSFe	

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		2 3/8"	5475'		<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Date of First, Resumed Production, SWD or Inj.			Producing Method					
9/19/98			<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.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	5		350		5			

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 4995-5300