

ORIGINAL

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

API NO. 15- 119-10027-0001

County MEADE

- C - SE - NE Sec. 3 Twp. 33S Rge. 30 X ^E _W

1996 Feet from S (circle one) Line of Section

666 Feet from E (circle one) Line of Section

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

Lease Name STEVENS (MORROW) UNIT Well # SMU 308

Field Name STEVENS

Producing Formation MORROW

Elevation: Ground 2724' KB 2734'

Total Depth 5835' PBDT 5788'

Amount of Surface Pipe Set and Cemented at 1567' (exist) Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Workover on 10.20.03
(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. _____

Operator: License # 32198

Name: PETROSANTANDER (USA) INC

Address 6363 WOODWAY suite 350

City HOUSTON

State/Zip TEXAS 77057

Purchaser: NA

Operator Contact Name: JASON SIZEMORE

Phone (713) 784-8700

Contractor: Name: CHEYENNE DRILLING

License: 5382

Wellsite Geologist: _____

Designate Type of Completion

 New Well Re-Entry X Workover

 Oil SWD X SIOW Temp. Abd.

 Gas ENHR SIGW Plug Abd

 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: Colorado Oil & Gas

Well Name: LESLIE 2

Original Comp. Date 12/21/55 Original TD 5835'

 Deepening Re-perf. Conv. to Enhr/SWD

 Plug Back PBDT

 Commingled Docket No. _____

 Dual Completion Docket No. _____

 Other (SWD or Inj?) Docket No. _____

04/13/01 04/14/01 06/06/01

Spud Date or Date Reached TD Completion Date or

Recompletion Date Recompletion 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 _____

Title Vice-President, Operations Date 10/01/2001

Subscribed and sworn to before me this 1ST day of OCTOBER, 2001.

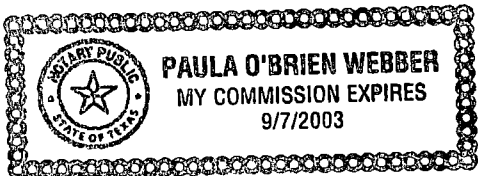
Notary Public Paula O'Brien Webber

Date Commission Expires 9/07/03

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

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

Form ACO-1 (7-91)



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OCT 09 2001

KCC WICHITA

X

Operator Name PETROSANTANDER (USA) INC Lease Name STEVENS (Morrow) UNIT Well # SMU 308

Sec. 3 Twp. 33S Rge. 30 East West

County MEADE

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

Log Formation (Top), Depth and Datums Sample

Name Top Datum

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/exist	none/existing	9-5/8"	24#	1567'		700	
Production/exist	none/existing	5-1/2"	15.5#	5822'-2856'		200	
Production/new	none/existing	5-1/2"	15.5#	2864'	set w/casing	patch	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	2935-3677'	Class A / common	100 / 250	2% cc / -

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
4	5668' - 5680' (existing)		
4	5684' - 5698' (existing)		
4	5668' - 5702' (new)		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj Awaiting Pump Unit	Producing Method <input type="checkbox"/> Flowing <input 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

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) Shut In Well

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KCC WICHITA

ALLIED CEMENTING CO., INC.

7608

Federal Tax I.D.# 48-0727860

ORIGINAL

SERVICE POINT

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

Med Lodge

DATE <i>5-31-01</i>	SEC.	TWP. <i>32S</i>	RANGE <i>30W</i>	CALLED OUT <i>6:00 AM</i>	ON LOCATION <i>9:30 AM</i>	JOB START <i>10:15 AM</i>	JOB FINISH <i>2:00 PM</i>
LEASE <i>SMU</i>	WELL # <i>308</i>	LOCATION <i>Plains 32S 30W</i>			COUNTY <i>Meade</i>	STATE <i>Ks</i>	

OLD NEW (Circle one)

CONTRACTOR *Eagle Well Service*
 TYPE OF JOB *Squeeze*
 HOLE SIZE *17 7/8* T.D.
 CASING SIZE *5 1/2 x 15.5* DEPTH
 TUBING SIZE *2 3/8* DEPTH *2781*
 DRILL PIPE DEPTH
 TOOL *Packer* DEPTH *2781*
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG.
 PERFS. *2935 - 3677*
 DISPLACEMENT *17 1/2 BBLs Fresh H₂O*

OWNER *Petro santander*

CEMENT
 AMOUNT ORDERED *250 class A feet*
100 sx class A 2% cc

EQUIPMENT

PUMP TRUCK CEMENTER *Justin Hart*
 # *345* HELPER *Mark Brungardt*
 BULK TRUCK
 # *353* DRIVER *Jason Tritt*
 BULK TRUCK
 # *240* DRIVER *Troy Brian*

COMMON	<i>550</i>	@	<i>7.85</i>	<i>2747.50</i>
POZMIX		@		
GEL		@		
CHLORIDE	<i>2</i>	@	<i>30.00</i>	<i>60.00</i>
		@		
		@		
		@		
		@		
		@		
HANDLING	<i>352</i>	@	<i>1.10</i>	<i>387.20</i>
MILEAGE	<i>352 x 50</i>		<i>.04</i>	<i>704.00</i>

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TOTAL *3898.70*

OCT 09 2001

KCC WICHITA SERVICE

REMARKS:

Back side loaded Press to 500#
load tubing 95 BBL Take Inject Rate
4 BBL @ 350# Pump 250 sx A feet @
15.5 100 sx A 2% cc @ 15.5# Disp on
Vacuum 15 BBLs shutin 5 min 1 BBL id 16
shut down 15 min @ 17 BBLs Packer clear
170 Pump 4 BBL 500# Release Packer
Reverse Out

DEPTH OF JOB	<i>3677</i>			
PUMP TRUCK CHARGE				<i>1130.00</i>
EXTRA FOOTAGE		@		
MILEAGE	<i>20</i>	@	<i>3.00</i>	<i>60.00</i>
PLUG		@		
<i>Squeeze Manifold</i>		@	<i>75.00</i>	<i>75.00</i>

TOTAL *6265.00*

CHARGE TO: *Petro santander USA*

STREET _____
CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL _____

TAX *33 47*
 TOTAL CHARGE *5494.17*
 DISCOUNT *561.37* IF PAID IN 30 DAYS
4932.80

To Allied Cementing Co., Inc.
 You are hereby requested to rent cer. ing 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. wner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE *Blac Bina*

PRINTED NAME _____