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5-30-03
MAY 30 2003

KCC WICHITA

P&A

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 5225
Name: Quinque Operating Company
Address: P O Box 2738
City/State/Zip: Liberal, KS 67905-2738
Purchaser: N/A
Operator Contact Person: Michael Moore
Phone: (620) 624-2578
Contractor: Name: Abercrombie RTD, Inc.
License: 30684
Wellsite Geologist: Paul Gerlach

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: _____
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. _____

5/5/03 5/15/03 N/A 5/16/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 119-21102-00-00
County: Meade
SW SW NW Sec. 21 Twp. 32 S. R. 28 East West
2200 feet from S / (circle one) Line of Section
330 feet from E / (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Ediger Well #: 1-21
Field Name: Angell

Producing Formation: N/A
Elevation: Ground: 2453.5 Kelly Bushing: 2458.5
Total Depth: 5535 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 1390 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 P.A. 6.3.03
(Data must be collected from the Reserve Pit)
Chloride content 3000 ppm Fluid volume 300 bbls
Dewatering method used Rain water
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: [Signature]
Title: President Michael Moore Date: 5/27/03

Subscribed and sworn to before me this 27 day of May

XX 2003
Notary Public: [Signature]
Beverly A. Stahle
Date Commission Expires: 11-27-03

NOTARY PUBLIC - State of Kansas
BEVERLY A. STAHLER
My Appt. Expires 11-27-2003

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

Operator Name: Quinque Operating Company Lease Name: Ediger Well #: 1-21
 Sec: 21 Twp: 32 S. R. 28 East West County: Meade

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 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:
 Dual Spaced Neutron
 Microlog
 Induction Log

Name	Top	Datum
Wreford	2824	-365
CGRV	2867	-408
WBNS	3519	-1060
Heebner Shale	4245	-1786
Lansing	4392	-1933
T/KCTY	4654	-2195
Swope	4823	-2364
Marmaton	4999	-2540
ChrK Sh	5140	-2681
	5405	-2946
	5440	-2981
	5460	-3001

CASING RECORD							
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	12-1/2"	8-5/8"	24#	1390'	Lite Class A	550 150	3% CaCl & 1/4" floseal

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	N/A		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	N/A			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
N/A	<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
	N/A	N/A	N/A	

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

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

 * I N V O I C E *

Invoice Number: 089895

Invoice Date: 05/15/03

Sold Quinque Operating Co.
 To: P. O. Box 2738
 Liberal, KS
 67905-2738

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Cust. I.D.: Quin
 P.O. Number...: Ediger, L-21
 P.O. Date.....: 05/15/03

MAY 30 2003

KCC WICHITA

Due Date.: 06/14/03
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	150.00	SKS	8.3500	1252.50	T
Gel	3.00	SKS	10.0000	30.00	T
Chloride	23.00	SKS	30.0000	690.00	T
Lite	550.00	SKS	7.7500	4262.50	T
FloSeal	138.00	LBS	1.4000	193.20	T
Handling	755.00	SKS	1.1500	868.25	E
Mileage (35)	35.00	MILE	37.7500	1321.25	E
755 sks @\$.05 per sk per mi					
Surface	1.00	JOB	520.0000	520.00	E
Extra Footage	1092.00	PER	0.5000	546.00	E
Mileage pmp trk	35.00	MILE	3.5000	122.50	E
TRP	1.00	EACH	100.0000	100.00	T
Guide Shoe	1.00	EACH	215.0000	215.00	T
AFU Insert	1.00	EACH	325.0000	325.00	T
Basket	1.00	EACH	180.0000	180.00	T
Centralizers	3.00	EACH	55.0000	165.00	T

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$1079.12 ONLY if paid within 30 days from Invoice Date

Subtotal:	10791.20
Tax.....:	504.10
Payments:	0.00
Total....:	11295.30

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MAY 19 2003

\$10,216.18

ALLIED CEMENTING CO., INC. 12429

Federal Tax I.D.# 48-0727860

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

SERVICE POINT Med Lodge

DATE <u>5-7-03</u>	SEC. <u>21</u>	TWP. <u>32S</u>	RANGE <u>28W</u>	CALLED OUT	ON LOCATION <u>2:00 AM</u>	JOB START <u>6:25 AM</u>	JOB FINISH <u>7:30 AM</u>
LEASE <u>Ediger</u>	WELL# <u>1-21</u>	LOCATION <u>Meade Stop light</u>		COUNTY <u>Meade</u>	STATE <u>Ks</u>		
OLD OR NEW (Circle one) <u>NEW</u>		<u>25 SW to curve 1/2 S E</u>					

CONTRACTOR Abercrombie #8

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 1392

CASING SIZE 8 7/8 x 2 1/4 DEPTH 1390

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL AFU Inscr DEPTH 1361

PRES. MAX 1000 MINIMUM _____

MEAS. LINE _____ SHOE JOINT 29

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT 88 BBLs Fresh #3

OWNER Quinque Oper

CEMENT AMOUNT ORDERED 550 SK 65.35.6 + 3% cc + 1/4" Flo-seal

150 SK class A + 3% cc + 1/4" Flo-seal

COMMON <u>A</u>	<u>150</u>	@	<u>8.35</u>	<u>1252.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>10.00</u>	<u>30.00</u>
CHLORIDE	<u>23</u>	@	<u>30.00</u>	<u>690.00</u>
		@		
<u>lite weight</u>	<u>550</u>	@	<u>7.75</u>	<u>4262.50</u>
		@		
<u>Flo-seal</u>	<u>138</u>	@	<u>1.40</u>	<u>193.20</u>
		@		
HANDLING	<u>755</u>	@	<u>1.15</u>	<u>868.25</u>
MILEAGE	<u>755 x .35</u>		<u>10.5</u>	<u>1321.25</u>
				TOTAL <u>8617.70</u>

EQUIPMENT

PUMP TRUCK # 343 CEMENTER Justin Hart

BULK TRUCK # 240 HELPER Mark Brungardt

BULK TRUCK # _____ DRIVER Mitch Wells

BULK TRUCK # _____ DRIVER Jim Weighous

REMARKS:

Pipe on BTM Drop Ball Break Circ

3 BBLs Fresh #3

550 SK 65.35.6 @ 12.8" - 194 BBLs

150 SK A 3/2 @ 15.2" - 36 BBLs

Release Plug Disp 88 BBLs of

Fresh #3 and Plug 500-1000"

Release PST Float Held

Circulated Cement ✓

SERVICE

DEPTH OF JOB	<u>1392</u>		
PUMP TRUCK CHARGE	<u>0-300</u>		<u>520.00</u>
EXTRA FOOTAGE	<u>1092</u>	@	<u>1.50</u> <u>546.00</u>
MILEAGE	<u>35</u>	@	<u>3.50</u> <u>122.50</u>
PLUG	<u>8 7/8 TRP</u>	@	<u>100.00</u> <u>100.00</u>
		@	
		@	
TOTAL <u>1288.50</u>			

CHARGE TO: Quinque Oper

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

<u>8 7/8 Reg Guide Shoe</u>	@	<u>215.00</u>	<u>215.00</u>
<u>AFU Inscr</u>	@	<u>325.00</u>	<u>325.00</u>
<u>Basket 1"</u>	@	<u>180.00</u>	<u>180.00</u>
<u>3 Centralizers</u>	@	<u>55.00</u>	<u>165.00</u>
	@		
TOTAL <u>885.00</u>			

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing 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 of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE 10791.20

DISCOUNT 1079.12 IF PAID IN 30 DAYS

SIGNATURE Roger Pearson

PRINTED NAME _____

Any Applicable Tax will be charged upon Invoicing



SALES OFFICE:
 100 S. Main
 Suite #607
 Wichita KS 67202
 (316) 262-3699
 (316) 262-5799 FAX

COPY
SALES & SERVICE OFFICE:
 10244 NE Hiway 61
 P.O. Box 8613
 Pratt, KS 67124-8613
 (316) 672-1201
 (316) 672-5383 FAX

ACIDIZING - FRACTURING - CEMENTING

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 Invoice

MAY 30 2003 86000

KCC WICHITA

Bill to:

Quinque Operating Co.
 P.O. Box 2738
 Liberal, KS 67905-2738

Invoice	Invoice Date	Order	Order Date		
305079	5/23/03	6516	5/15/03		
Service Description					
Cement					
Lease		Well			
Ediger		1-21			
AFE	CustomerRep	Treater	Well Type	Purchase Order	Terms
	S. Craig	S. Frederick	New Well		Net 30

ID.	Description	UOM	Quantity	Unit Price	Price
D203	60/40 POZ (COMMON)	SK	140	\$7.84	\$1,097.60 (T)
C320	CEMENT GELL	LB	476	\$0.25	\$119.00 (T)
F163	WOODEN CEMENT PLUG, 8 5/8"	EA	1	\$85.00	\$85.00 (T)
E107	CEMENT SERVICE CHARGE	SK	140	\$1.50	\$210.00 (T)
E100	HEAVY VEHICLE MILEAGE - 1 WAY	MI	35	\$3.25	\$113.75 (T)
E104	PROPPANT / BULK DELIV SERVICES/TON MILE, \$200 MIN	TM	210	\$1.30	\$273.00 (T)
R303	CEMENT PUMPER, 1001-1500' 1ST 4 HRS ON LOC	EA	1	\$1,239.00	\$1,239.00 (T)

Sub Total: \$3,137.35
Discount: \$786.04
Discount Sub Total: \$2,351.31
Tax Rate: 6.30% **Taxes:** \$148.13
 (T) Taxable Item **Total:** \$2,499.44

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 MAY 27 2003

PLEASE REMIT TO Acid Services, LLC, Dept No 1131 , Tulsa, OK 74182

Accounts become past due the last day of the month following billing. Interest rate 1.5% per month (18% per year) on past due accounts.



INVOICE NO.		Subject to Correction		FIELD ORDER 6516	
Date	5-15-03	Lease	ENIGER	Well #	1-21
Customer ID		County	MEADE	State	KS
QUINQUE OPERATING		Depth	1400	Formation	
		Casing		Casing Depth	
		Customer Representative	STEVEN CRAIG		Treater
				SHAUN BRECKENRIDGE	
AFE Number		PO Number		Materials Received by	
				X Steven Craig	

Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D203	140.30	60/40 PUL (Cement)	✓			
C320	476.75	Cement Gel	✓			
F163	1	Wooden Cmt Plug 8 3/4"	✓			
E107	140.5K	CMT SERVICE CHARGE				
E100	35	UNITS 1 MILES 35				
E104	300.7m	TONS 6 MILES 35				
R303	1ea	EA. 4 hrs PUMP CHARGE				
Discounted TOTAL PLUS TAX						2351.31

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



TREATMENT REPORT

Customer ID	Date
Customer <i>Quingue</i>	<i>5-15-03</i>
Lease <i>EDIGER</i>	Lease No.
	Well # <i>1-21</i>

Field Order # <i>6516</i>	Station <i>LIBERAL</i>	Casing	Depth <i>1400</i>	County <i>MEADE</i>	State <i>KS</i>
Type Job <i>PTA (New well)</i>	Formation	Legal Description			

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
<i>4 1/2 DP.</i>		<i>Plugs</i>		<i>140 st 60/40 p02</i>				
Depth	Depth	From	To	Pre Pad		Max		5 Min.
		<i>1400</i>	<i>1206</i>	<i>@ 14.8"</i>		<i>3</i>	<i>200</i>	
Volume	Volume	From	To	Pad		Min		10 Min.
		<i>500</i>	<i>200</i>			<i>3</i>	<i>0</i>	
Max Press	Max Press	From	To	Frac		Avg		15 Min.
		<i>40</i>	<i>0</i>			<i>3</i>	<i>0</i>	
Well Connection	Annulus Vol.	From	To	Flush		HHP Used		Annulus Pressure
Plug Depth	Packer Depth	From	To			Gas Volume		Total Load

Customer Representative <i>STEVEN CRAIG</i>	Station Manager <i>DIRK MORRIS</i>	Treater <i>Shawn FREDERICH</i>
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Service Units	<i>108</i>	<i>78</i>	<i>38</i>	<i>71</i>				
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
<i>2000</i>					<i>ON LOCATION</i>
<i>2005</i>					<i>PRE-JOB SAFETY MEETING</i>
<i>2010</i>					<i>Rig up P.T.</i>
<i>2025</i>					<i>Rig pulling BOP</i>
<i>2045</i>					<i>SHUT DOWN / WAIT FOR STORM TO PASS</i>
<i>0230</i>	<i>200</i>		<i>10</i>	<i>3 -</i>	<i>PUMP 1ST Plug (1400ft+) 10 BBLs WATER</i>
<i>0234</i>	<i>0</i>		<i>11</i>	<i>3</i>	<i>Pump 11 BBLs CMT 60/40 @ 14.8"</i>
<i>0240</i>	<i>0</i>		<i>4</i>	<i>3</i>	<i>Pump 4 BBLs WATER</i>
<i>0244</i>	<i>0</i>		<i>10</i>	<i>3</i>	<i>Pump 10 BBLs MUD</i>
<i>0255</i>					<i>SHUT DOWN / Pull DP</i>
<i>0330</i>					<i>DD @ 500ft 2ND Plug</i>
<i>0333</i>	<i>200</i>		<i>10</i>	<i>3</i>	<i>Pump 10 BBLs WATER</i>
<i>0338</i>	<i>0</i>		<i>11</i>	<i>3</i>	<i>Pump 11 BBLs CMT @ 14.8"</i>
<i>0342</i>	<i>0</i>		<i>4</i>	<i>3</i>	<i>Pump 4 BBLs WATER</i>
<i>0345</i>					<i>SHUT DOWN / Pull D.P.</i>
<i>0420</i>	<i>0</i>		<i>4</i>	<i>1</i>	<i>Plug Surface 15 SKS</i>
<i>0430</i>	<i>0</i>		<i>8</i>	<i>2</i>	<i>Plug RAT / mouse 25 SKS</i>
<i>0435</i>					<i>WASH lines to PIT</i>
<i>0500</i>					<i>JOB Complete ✓</i>