

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 31406
Name: Prairie Resources, Inc.
Address: 1016 Amanda Pines Drive
City/State/Zip: Parker, CO 80138
Purchaser: Cooperative Refining
Operator Contact Person: Robert W. Packard
Phone: (303) 840-3313
Contractor: Name: Clarke Corporation
License: 5105

Wellsite Geologist: N/A
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: Prairie Resources, Inc.

Well Name: #1-23
Original Comp. Date: 12-7-97 Original Total Depth: PBTD 4150'

Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. Pending
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

10-26-00 10-26-00
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

{ CIBP removed 10-26-00

API No. 15 - 007-22497-000

County: Barber

C NW NE SE Sec. 23 Twp. 31 S. R. 13 East West

2310 feet from S ~~XXX~~ (circle one) Line of Section

940 feet from E ~~XXX~~ (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Packard Well #: 1-23

Field Name: Nurse

Producing Formation: Swope/Mississippi

Elevation Ground: 1617' Kelly Bushing: 1625'

Total Depth: 4360' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 227 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set N/A Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REWORK JH 6/21/01
(Data must be collected from the Reserve Pit)

Chloride content N/A ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name: N/A

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

CONSERVATION DIVISION
Wichita, Kansas

RECEIVED
STATE CORPORATION COMMISSION
DEC 14 2000

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: Robert W. Packard

Title: President Date: 12-11-00

Subscribed and sworn to before me this 11th day of December, 2000

Notary Public: Jane B. Alexander

Date Commission Expires: 3-15-02

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

KCC

X

ORIGINAL

Operator Name: Prairie Resources, Inc. Lease Name: Packard Well #: 1-23
 Sec. 23 Twp. 31 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 (Attach Additional Sheets) 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 (Submit Copy) List All E. Logs Run: <p style="text-align: center;">N/A</p>	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <p style="text-align: center;">N/A</p>
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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	# Sacs Used	Type and Percent Additives
Surface	12 1/4"	8 5/8"	28#	227'	60/40 POZ	150 sx	3% cc 2% gel
Production	7 7/8"	4 1/2"	10.5#	4350'	ASC	150 sx	5# Kolseal/SK

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	
4	Perf Miss. 4232-4240'	March, 1996		4232-40'
	Set CIBP @ 4150'	12-5-97		4150'
4	Perf Swope 4066-4070'	12-5-97		4066-70'
	Remove CIBP @ 4150'	10-25-00		
	Pump Miss. 4232-4240' & Swope 4066-4070'			4232-40' 4066-70'

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8"	4210'	N/A	
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
10-26-00		<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
	10	25	110		34°

Disposition of Gas METHOD OF COMPLETION Production Interval.

Vented Sold Used on Lease
 Open Hole Perf. Dually Comp. Commingled Other (Specify)

4232-4240 Mississippi
4066-4070' Swope