

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL HISTORY - DESCRIPTION OF

RECEIVED

OCT 10 2002

10-10-02

KCC WICHITA

ORIGINAL

Operator: License # 6236
Name: MTM PETROLEUM, INC.
Address: P.O. BOX 82
City/State/Zip: SPIVEY KS 67142-0082
Purchaser: _____
Operator Contact Person: MARVIN A. MILLER
Phone: (620) 532-3794
Contractor: Name: PICKRELL DRILLING CO, INC.
License: 5123

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OCT 09 2002

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Wellsite Geologist: JERRY A. SMITH
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____

<u>07/08/02</u>	<u>07/17/02</u>	<u>07/22/02</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 095-21,816-00-00
County: KINGMAN
SW Sec. 20 Twp. 29 S. R. 7 East West
990 feet from (S) N (circle one) Line of Section
2310 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: MAYER Well #: 2

Field Name: SPIVEY-GRABS-BASIL

Producing Formation: MISSISSIPPIAN

Elevation: Ground: 1542 Kelly Bushing: 1547

Total Depth: 4543 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 233 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 See 10-16-02
(Data must be collected from the Reserve Pit)

Chloride content 43,000 ppm Fluid volume 370 bbls

Dewatering method used HAULED OFFSITE

Location of fluid disposal if hauled offsite: _____

Operator Name: MESSENGER PETROLEUM

Lease Name: NICHOLAS SWD License No.: 4706

Quarter NW Sec. 20 Twp. 30 S. R. 8 East West

County: KINGMAN Docket No.: D-27,434

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.

Marvin A. Miller
Title: Marvin A. Miller, President 10-09-02

Subscribed and sworn to before me this 9th day of October, 2002

Notary Pub

KATHY HILL
Notary Public - State of Kansas
My Appt. Expires 01-04-03

Kathy Hill
Kathy Hill
Ny Commission Expires 01-04-03

KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: Release
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
NOV 05 2003
From
Confidential

Operator Name: MTM PETROLEUM, INC. Lease Name: MAYER Well #: 2
 Sec. 20 Twp. 29 S. R. 7 East West County: KINGMAN

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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum Name Top Datum HEEBNER SHALE 3112 -1565 LANSING 3353 -1806 B/KANSAS CITY 3838 -2296 MISSISSIPPIAN 4125 -2578 SIMPSON SAND 4512 -2965
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 <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
List All E. Logs Run:		
DUAL INDUCTION DUAL COMPENSATED POROSITY SONIC BOND		

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
SURFACE	12 1/4	8 5/8	24#	233	60/40 POZ	165	2%GEL;3%CC
PRODUCTION	7 7/8	4 1/2	10.5#	4234	ASC	125	5# KOLSEAL

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
4	2 3/8 HEC 4124 - 4128	1000 GAL 15% FE ACID JOB	4160
4	2 3/8 HEC 4140 - 4160	43,000 SAND FRAC	4160

TUBING RECORD		Size <u>2 3/8</u>	Set At <u>4166</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr. <u>07/31/02</u>		Producing Method Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. <u>2</u>	Gas Mcf <u>30</u>	Water Bbls. <u>28</u>	Gas-Oil Ratio <u>15:1</u>	Gravity

Disposition of Gas: Vented Sold Used on Lease *(If vented, Sumit ACO-1B.)*

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval: _____

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ORIGINAL

ALLIED CEMENTING CO., INC. 10195

Federal Tax I.D.# 48-0727860

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

SERVICE POINT: Medicine L.O.B.

DATE 7-9-02 SEC 20 TWP 29N RANGE 7W CALLED OUT 11:30 AM ON LOCATION 2:30 AM JOB START 5:00 AM JOB FINISH 5:15 AM

CONTRACTOR Pinkell OWNER MTM Petroleum TYPE OF JOB Surface CEMENT AMOUNT ORDERED 1655x60'40'+3% CC+2% Gel

EQUIPMENT PUMP TRUCK CEMENTER David W. #302 HELPER Dwight W. BULK TRUCK #363 DRIVER Robert L. TOTAL 1974.35

REMARKS: Pipe on Bottom Breaker Pump 1655x60'40'+3% CC+2% Gel Displace w/ Fresh H2O 13 3/4 BBLs shut in Cement Did Cure

DEPTH OF JOB 233' PUMP TRUCK CHARGE 0-300' 520.00 RECEIVED OCT 10 2002 KCC WICHITA

CHARGE TO: MTM Petroleum STREET P.O. Box 82 CITY SPIVEY STATE KANSAS ZIP 67142 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.

SIGNATURE x Mike Kern x Mike Kern PRINTED NAME TAX TOTAL CHARGE 2274.35 DISCOUNT 454.87 1819.48

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Thank you?

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ORIGINAL

ALLIED CEMENTING CO., INC. 10199

Federal Tax I.D.# 48-0727860

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

SERVICE POINT: Medicine L.D.C.

Table with columns: DATE, SEC, TWP, RANGE, CALLED OUT, ON LOCATION, JOB START, JOB FINISH, LEASE, WELL #, LOCATION, COUNTY, STATE, OLD OR NEW.

Main contract table with columns: CONTRACTOR, OWNER, TYPE OF JOB, CEMENT, HOLE SIZE, T.D., DEPTH, AMOUNT ORDERED, TUBING SIZE, DEPTH, DRILL PIPE, DEPTH, TOOLS, PRES. MAX, MINIMUM, MEAS. LINE, SHOE JOINT, CEMENT LEFT IN CSG., PERFS., DISPLACEMENT, EQUIPMENT, PUMP TRUCK, CEMENTER, HELPER, BULK TRUCK, DRIVER, MILEAGE, TOTAL.

REMARKS:

SERVICE

Handwritten remarks: Pipe on Bottom Breaks in, Pump 155x60 12 1/2 in Rat Pump Mud Clean 12 BBL's Pump 125 SX ASC + 5# Kol-Seal/Chut Down Wash Pump Lines Displace w/ Fresh #20 Slow Rate Pump Plug Float did hold

Table with columns: DEPTH OF JOB, PUMP TRUCK CHARGE, EXTRA FOOTAGE, MILEAGE, PLUG RUBBER.

TOTAL \$1378.00

CHARGE TO: MTM Petroleum, STREET, CITY, STATE, ZIP

FLOAT EQUIPMENT

Table with columns: 1-Guide Shoe, 1-AEU INSERT, 1-BASKET, 4-CENTRALIZERS.

TOTAL \$631.00

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.

TAX, TOTAL CHARGE \$3921.75, DISCOUNT \$392.18 IF PAID IN 30 DAYS

SIGNATURE x Mike Kern

SIGNATURE x Mike Kern, PRINTED NAME

Net # 3529.57

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