

RECEIVED

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

MAY 15 2002
5-15-2002
KCC WICHITA

Operator: License # 5123
Name: Pickrell Drilling Company, Inc.
Address: 100 S. Main, Suite 505
City/State/Zip: Wichita, Kansas 67202-3738
Purchaser: None
Operator Contact Person: Larry J. Richardson
Phone: (316) 262-8427
Contractor: Name: Company Tools
License: 5123
Wellsite Geologist: Wesley Hansen

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. _____
4-15-02 4-25-02 4-26-02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-057-20,561-0000
County: Ford
C SE NW Sec. 35 Twp. 27S S. R. 24 East West
1980' feet from S / N (circle one) Line of Section
1980' feet from E / W (circle one) Line of Section

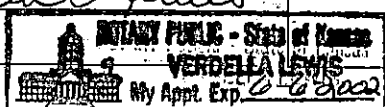
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Barngrover "A" Well #: 1
Field Name: _____
Producing Formation: None
Elevation: Ground: 2515 Kelly Bushing: 2520
Total Depth: 5160 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 865' KB 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 EH 8-1-02
(Data must be collected from the Reserve Pit)
Chloride content 3800 ppm Fluid volume 400 bbls
Dewatering method used _____
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: C. W. Sebitts - President Date: 5-14-02
Subscribed and sworn to before me this 14th day of May,
2002
Notary Public: [Signature]
Date Commission Expires: 6-06-2002



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

X

Operator Name: Pickrell Drilling Co. Inc. Lease Name: Barngrover "A" Well #: 1
 Sec. 35 Twp. 27S S. R. 24 East West County: Ford

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No: <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: Dual Induction Compensated Density	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Datum Name Top Datum Heebner 4217 (-1697) Lansing 4345 (-1825) Stark 4665 (-2145) Hushpuckney 4713 (-2193) Marmaton 4807 (-2287) Pawnee 4887 (-2367) Cherokee 4935 (-2415) B/Inola 5032 (-2512) Mississippian 5064 (-2544) Miss Dolomite 5073 (-2553)
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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	# Sacs Used	Type and Percent Additives
Surface Casing	12 1/4"	8 5/8"	23#	865'	Class A	150sx	2% gel, 3% CC
					Lite	250sx	3% CCw/1/4# FC/sx

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose: P&A	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		60-40 poz	170sx	60-40 poz, 6% gel

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 <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.		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 Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) _____

ALLIEL CEMENTING CO., INC.

09810

Federal Tax I.D.# 48-0727860

Delaware ORIGINAL SERVICE POINT: Medicine L.D.G.

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

DATE <u>4-16-02</u>	SEC. <u>35</u>	TWP. <u>27S</u>	RANGE <u>24W</u>	CALLED OUT <u>4:30 A.M.</u>	ON LOCATION <u>9:00 A.M.</u>	JOB START <u>2:40 P.M.</u>	JOB FINISH <u>3:15 P.M.</u>
LEASE <u>Barngrove</u> WELL # <u>#A1U</u>		LOCATION <u>Ford W/side 8 W on</u>			COUNTY <u>FORD</u>	STATE <u>KS</u>	
OLD OR <u>NEW</u> (Circle one)			<u>Black Top 1N 3/4W 5/10</u>				

CONTRACTOR Pickrell Drly Co.
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 870
 CASING SIZE 8 5/8 DEPTH 865
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 870
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 43.12
 CEMENT LEFT IN CSG. 43.12 FT
 PERFS. _____
 DISPLACEMENT Fresh H₂O 53 BBLs

OWNER Pickrell Drly Co.

EQUIPMENT
 PUMP TRUCK CEMENTER David W.
 # 302 HELPER Dwayne W.
 BULK TRUCK
 # 359 DRIVER ERIC B.
 BULK TRUCK
 # _____ DRIVER _____

CEMENT
 AMOUNT ORDERED 250sx 65:35:6+3%
 cc + 1/4# Flo-Seal 150sx Class A +
 3%cc + 2% Gel
 COMMON A 150 @ 6.65 997.50
 POZMIX _____ @ _____
 GEL 3 @ 10.00 30.00
 CHLORIDE 13 @ 30.00 390.00
ALW 250 @ 6.30 1575.00
FLO-SEAL 63# @ 1.40 88.20
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING 429 @ 1.10 471.90
 MILEAGE 429 x 60 .04 1029.60

TOTAL 4582.20

REMARKS:

Pipe on Bottom Break c/c
Pump 250sx 65:35:6+3%cc + 1/4#
Flo-seal pump 150sx Class A + 3%
cc + 2% gel Displace w/Fresh
H₂O Bump Plug shutt in
Cement Did c/c

SERVICE

DEPTH OF JOB 865
 PUMP TRUCK CHARGE D-300' 520.00
 EXTRA FOOTAGE 56.5' @ .50 282.50
 MILEAGE: 66 @ 3.00 180.00
 PLUG RUBBER 8 5/8" @ 100.00 100.00
 _____ @ _____
 _____ @ _____

TOTAL 1082.50

CHARGE TO: Pickrell Drly Co.
 STREET P.O. Box 1303
 CITY GREAT BEND STATE KANSAS ZIP 67530

FLOAT EQUIPMENT

1-Baffle Plate @ 45.00 45.00
1-Basket @ 180.00 180.00
 _____ @ _____
 _____ @ _____
 _____ @ _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment

ALLIED CEMENTING CO., INC.

09812

Federal Tax I.D.# 48-0727860

ORIGINAL
SERVICE POINT:
Medicine L.D.G

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

DATE	4-26-02	SEC	35	TWP.	27S	RANGE	24W	CALLED OUT	5:00 A.M.	ON LOCATION	9:30 A.M.	JOB START	11:00 A.M.	JOB FINISH	3:45 P.M.
LEASE	Barnes	WELL #	A1		LOCATION	Ford 1/2 N 8 W on			COUNTY	Ford	STATE	KS			
OLD OR	(NEW) (Circle one)		BlackTOP 1N 3/4 W 3/10 TO												

CONTRACTOR Pickrell Drly #1
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 3/8 T.D. 1560
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 1560
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT Mud + Fresh H²O

OWNER Pickrell Drly Co.

CEMENT
 AMOUNT ORDERED 135sx 60:40:6
35sx 60:40:6

COMMON	<u>102</u>	@	<u>6.65</u>	<u>678.30</u>
POZMIX	<u>68</u>	@	<u>3.55</u>	<u>241.40</u>
GEL	<u>9</u>	@	<u>10.00</u>	<u>90.00</u>
CHLORIDE		@		
		@		
		@		
		@		
		@		
HANDLING	<u>179</u>	@	<u>1.10</u>	<u>196.90</u>
MILEAGE	<u>179</u> X <u>60</u>		<u>.04</u>	<u>429.60</u>

EQUIPMENT
 PUMP TRUCK CEMENTER David W.
 # 302 HELPER Dwayne W.
 BULK TRUCK
 # 240 DRIVER Ed R.
 BULK TRUCK
 # _____ DRIVER Jim W.

TOTAL 1636.20

REMARKS:

SERVICE

Break Circ Pump 9 BBLs Fresh H²O Pump 50sx Cement Pump 3 BBLs Fresh H²O Pump 12 BBLs Mud at 1560 2nd Plug at 870 Pump 2 BBLs Fresh H²O Pump 50sx Cement Pump 6 1/2 BBLs Fresh H²O 3rd Plug at 40 FT Pump 10sx Plug RAT w/15sx + Mouse w/10sx Had To Run 800FT Back in and Pump 35sx Cement

DEPTH OF JOB	<u>1560</u>			
PUMP TRUCK CHARGE				<u>520.00</u>
EXTRA FOOTAGE		@		
MILEAGE	<u>60</u>	@	<u>3.00</u>	<u>180.00</u>
PLUG	<u>Wooden 8584</u>	@	<u>23.00</u>	<u>23.00</u>
		@		
		@		

TOTAL 723.00

CHARGE TO: Pickrell Drly Co.
 STREET P.O. Box 1303
 CITY GREAT BEND STATE KANSAS ZIP 67930

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or

TOTAL