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6-16-04

15.009.19044.0001

L. D. DRILLING, INC.

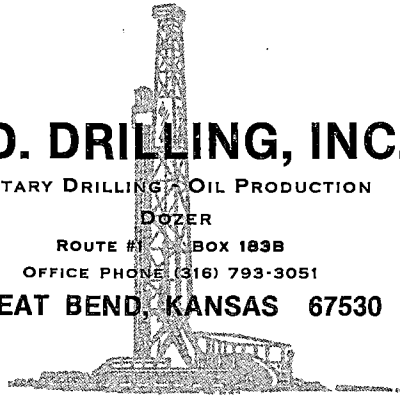
ROTARY DRILLING - OIL PRODUCTION

DOZER

ROUTE # BOX 183B

OFFICE PHONE (316) 793-3051

GREAT BEND, KANSAS 67530



June 16, 2003

CONFIDENTIAL

Kansas Corporation Commission
Conservation Division
130 S. Market, Room 2078
Wichita, KS 67202

RECEIVED
JUN 18 2003
KCC WICHITA

RE: Hahn OWWO #3
SE NW SE Sec. 33-20-14
Barton County, Kansas

KCC
JUN 16 2002

To Whom It May Concern:

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Please keep the captioned well ~~confidential~~ on side two of the ACO-1.

Thank you for your consideration.

Respectfully,

Bessie DeWerff
Office Manager

bd/sd

- Encl. ACO-1
- Cement tickets
- Logs
- Multipoint Back Pressure Test

Release
JUL 14 2004
From
Confids. inf

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6039
Name: L.D. Drilling, Inc.
Address: 7 SW 26th Ave.
City/State/Zip: Great Bend, Kansas 67530
Purchaser: Waiting on Gas Line
Operator Contact Person: L.D. Davis
Phone: (620) 793-5831
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: _____

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: National Cooperative Refinery
Well Name: McGreavy B#2

Original Comp. Date: 10-26-51 Original Total Depth: 3555
____ 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. _____

05-07-03 05-08-03 05-13-03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

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KCC WICHITA

API No. 15 - 009-19044-00-01
County: Barton County, Kansas
SE NW SE Sec. 33 Twp. 20 S. R. 14 East West
1665 feet from (S) N (circle one) Line of Section
1650 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Hahn "OWWO" Well #: 3
Field Name: Barton-Stafford
Producing Formation: Red Eagle

Elevation: Ground: 1912' Kelly Bushing: 1920'
Total Depth: 2483' Plug Back Total Depth: _____
Amount of Surface Pipe existing ~~saved~~ at 830 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 1 en 6-20-03
(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. 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: Bessie Deworff
Title: Sec./Treas. Date: 16th June 2003

Subscribed and sworn to before me this 16th day of June,
2003

Notary Public: Rashell Patten
Date Commission Expires: 2-2-07

NOTARY PUBLIC - STATE OF KANSAS
Rashell Patten
MY ADPT. EXP. 2-2-07

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: Release
 Wireline Log Received JUL 14 2004
 Geologist Report Received From
 UIC Distribution Confid. in

Operator Name: L.D. Drilling, Inc. Lease Name: Hahn "OWWO" Well #: 3
 Sec. 33 Twp. 20 S. R. 14 East West County: Barton County, Kansas

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 Compensated Porosity Log
 Sonic Cement Bond Log
 Dual Induction Log

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

WASHDOWN

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	# Sacjs Used	Type and Percent Additives
existing Surface		8-5/8"		830'			
Production	7-7/8"	5-1/2"	15.5#	2470'	50/50 Poz	225	4%gel 2%cc

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 (Amount and Kind of Material Used)	Depth
4	2326 = 2332	500 Gal 15% NEFFE	

TUBING RECORD	Size 2 3/8	Set At 2326	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. Waiting on Gas Line Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

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

Production Interval

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TREATMENT REPORT



Customer ID		Date	
Customer L.D. DRILLING		5-8-03	
Lease HANN OWWO		Lease No.	Well # 2
Field Order # 6345	Station PRATT, KS.	Casing 5 1/2	Depth 2470'
County BARTON		State KS.	
Type Job LONGSTRENGTH - NW		Formation TD-3547	Legal Description 33-20-14

PIPE DATA		PERFORATING DATA		FLUID USED		TREATMENT RESUME		
Casing Size 5 1/2	Tubing Size	Shots/Ft		Acid		RATE	PRESS	ISIP
Depth 2470'	Depth	From	To	Pre Pad		Max		5 Min.
Volume	Volume	From	To	Pad KCC		Min		10 Min.
Max Press	Max Press	From	To	Frac JUN 16 2002		Avg		15 Min.
Well Connection	Annulus Vol.	From	To			HHP Used		Annulus Pressure
Plug Depth 2457	Packer Depth	From	To	Flush CONFIDENTIAL		Gas Volume		Total Load

Customer Representative L.D. DAVIS	Station Manager HENRY	Treater K. GORDLEY
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Service Units	107	27	36	72
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Time	Casing Pressure	Tubing Pressure	Bbls. Pumped	Rate	Service Log
2300					ON LOCATION WASH DOWN TO 2483' - OLD 5 1/2" RUN 2470' 5/2 CASING. RUN GUIDE SHOE, INSERT FLOAT. IN 15' COLLAR - 2457'. CENT. - 1-3-5-15-17-19-21 BASKET - #1 - #3 - #7 DROP BALL - BREAK CIRC.
0235	250		12	6	PUMP 12 bbl MUD FLUSH
	250		3	6	PUMP 3 bbl H2O SPACER
	250		12	6	PUMP 12 bbl SUPERFLUSH
	250		3	6	PUMP 3 bbl H2O SPACER
	100		60	6	MAX CEMENT - 225 SK. 50/50 POZ 4% GEL, 2% OCE, 5 #/SK CAS SET, 5 #/SK GELSONOTE, 1% FCA-322 1/4% DEFOAMER STOP - WASH LANE - DROP PLUG
	0		0	7	START DESP
	300		24	6	LIFT CEMENT
0310	1100		58 1/2	5	PLUG DOWN - RELEASE - HOLD
0330	25 SK	50/50 POZ			PULL RAT HOLE & MOUSE HOLE



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ORIGINAL

FIELD ORDER

6345

INVOICE NO.	Subject to Correction		
Date 5-8-03	Lease HAHN OWWO	Well # 2	Legal 33-20-14
Customer ID	County BARTON	State KS	Station PRATT, KS
C H A R G E	Depth	Formation	Shoe Joint 12.30'
	Casing 5 1/2	Casing Depth 2470	TD 3547'
	Job Type	LOWEST/ENG-NU	
	Customer Representative L.D. DAVIS	Treater K. GORDLEY	

AFE Number	PO Number	Materials Received by X R. D. Lewis
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Product Code	QUANTITY	MATERIAL, EQUIPMENT and SERVICES USED	UNIT PRICE	AMOUNT	ACCOUNTING	
					CORRECTION	AMOUNT
D204	225 SK.	50/50 POZ CEMENT				
D203	25 SH.	50/50 POZ CEMENT		KCC		
C311	1125 lb.	CHL SET		JUN 16 2002		
C321	1125 lb.	BIRDSONITE				
C310	384 lb.	CALCIUM CHLORIDE		CONFIDENTIAL		
C320	384 lb.	CEMENT GEL				
C195	192 lb.	FLH-322				
C243	48 lb.	DEFORMER				
C307	500 gal.	MUD FLUSH				
C304	500 gal.	SUPERFLUSH II				
F191	1 EA.	5 1/2 GUIDE SHOE				
F231	1 EA.	5 1/2 INSERT FLOAT				
F101	7 EA.	5 1/2 TURBOLIZER				
F121	3 EA.	5 1/2 BASKET				
F143	1 EA.	5 1/2 TOP RUBBER PLUG				
E107	250 SK.	CEMENT SERV. CHARGE				
E100	50 mile	UNITS MILES				
E104	535 TM	TONS MILES				
R205	1 EA.	EA. 2470 PUMP CHARGE				
R701	1 EA.	CEMENT HEADS REQUIRED				
		PRICE =		7739.64		

Released
JUL 14 2004
From
Confidential

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



15.009.19044.0001

FIELD ORDER N° 23086

BOX 438 • HAYSVILLE, KANSAS 67060
316-524-1225

ORIGINAL

DATE 5-13 2003

IS AUTHORIZED BY: L.O. Drilling (NAME OF CUSTOMER)

Address _____ City _____ State _____

To Treat Well As Follows: Lease Hahn KCC Well No. #3 Gas Well Customer Order No. _____

Sec. Twp. Range _____ JUN 16 2002 County Barton State KS

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CONDITIONS: As a part of the consideration hereof it is agreed that Copeland Acid Service is to service or treat at owners risk, the hereinbefore mentioned well and is not to be held liable for any damage that may accrue in connection with said service or treatment. Copeland Acid Service has made no representation, expressed or implied, and no representations have been relied on, as to what may be the results or effect of the servicing or treating said well. The consideration of said service or treatment is payable. There will be no discount allowed subsequent to such date. 6% interest will be charged after 60 days. Total charges are subject to correction by our invoicing department in accordance with latest published price schedules.

The undersigned represents himself to be duly authorized to sign this order for well owner or operator.

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED

Well Owner or Operator

By LD Davis Agent

CODE	QUANTITY	DESCRIPTION	UNIT COST	AMOUNT
1004	500	gals 15010 NE/FE	150	650.00
1024	1	gal Inhibitor		25.00
1031	1	UPump Charge		400.00
1030	8	miles mileage	2.00	16.00
		Bulk Charge		
		Bulk Truck Miles		
		Process License Fee on _____ Gallons		
TOTAL BILLING				

Release
JUL 11 2004
From
Confidential info

I certify that the above material has been accepted and used; that the above service was performed in a good and workmanlike manner under the direction, supervision and control of the owner, operator or his agent, whose signature appears below.

Copeland Representative [Signature]

Station Great Bend KS

Well Owner, Operator or Agent

Remarks

KENS #41801

NET 30 DAYS

