

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

Operator: License # 31514

Name: Thoroughbred Associates, LLC

Address 10 Colonial Court

City/State/Zip Wichita, Kansas 67207

Purchaser: _____

Operator Contact Person: Robert C. Patton

Phone (316) 685-1512

Contractor: Name: Shields Drilling Co., Inc.

License: 5184

Wellsite Geologist: Robert Petersen

Designate Type of Completion

XX New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

XX Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

11-26-97 12-04-97 12-05-97

Spud Date Date Reached TD Completion Date

API NO. 15- 147-205840000

County Phillips

C - SW - SW - NE Sec. 11 Twp. 02S Rge. 19W XX W

2970' FSL Feet from S/N (circle one) Line of Section

2310' FEL Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, (SE), NW or SW (circle one)

Lease Name Mousley Well # 1

Field Name _____

Producing Formation N/A

Elevation: Ground 2246' KB 2251'

Total Depth 3620' LTD _____ PBTD _____

Amount of Surface Pipe Set and Cemented at 208' KB _____ Feet

Multiple Stage Cementing Collar Used? no

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan D&A JH 7-10-98
(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 2

Lease Name _____ License No. _____

Quarter Sec. Twp. S Rng. E/W

County _____ Docket No. _____

RELEASED
1-29-99
JAN 29 1999

FROM CONFIDENTIAL

CONFIDENTIAL

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 on 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 Patton

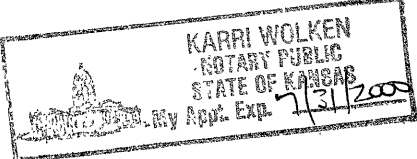
Title Managing Partner Date 1-02-98

Subscribed and sworn to before me this 2nd day of January, 19 98.

Notary Public Karri Wolken

Date Commission Expires July 31, 2000

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
G Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)



Rec'd
1-2-98

ORIGINAL

Operator Name Thoroughbred Associates, LLC Lease Name Mousley Well # #2 #1

Sec. 11 Twp. 02S Rge. 19W East West
 County Phillips

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	3374' -1123	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	3413' -1162	
List All E.Logs Run: Radiation Guard Log		LTD	3620' -1369	

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	# Sacks Used	Type and Percent Additives
Surface	12-1/4"	8-5/8"	28#	208'	60-40 pozmix	150	2% gel, 3% 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

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. D&A			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 N/A Bbls.	Gas N/A Mcf	Water N/A Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

ORIGINAL

OPERATOR: Thoroughbred Associates, LLC
LEASE NAME: Mousley #1
LOCATION: C SW SW NE, Sec. 11-T02S-R19W
Phillips County, Kansas
API#: 15-147-205840000

DST #1 (LKC "B", "D", "F" & "G") 3436-3504. 30-60-30-45. 1" blow first open, no blow 2nd open.
Rec. 30' ocm, 2% oil. SIP: 986/885#.

DST #2 ("I", "J" & "K") 3556-3620. Rec. 5' mud with scum of oil. FP 22-22/22-22#.
SIP 732/710#.

SAMPLE TOPS

Heebner	3372'-1121
Lansing	3422'-1171
RTD	3620'-1369
LTD	3620'-1369

JAN 2
CONFIDENTIAL

RELEASED
JAN 29 1999
FROM CONFIDENTIAL

STATE OF KANSAS
JAN 7 1999
COMMISSIONER OF REVENUE

ALLIED CEMENTING CO., INC.

9339

Federal Tax I.D.# ~~██████~~

P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT: R

ORIGINAL

DATE <u>11/26/97</u>	SEC. <u>11</u>	TWP. <u>2</u>	RANGE <u>19</u>	CALLED OUT	ON LOCATION	JOB START	JOB FINISH <u>9:15 pm</u>
LEASE <u>Mousley</u>	WELL # <u>1</u>	LOCATION <u>Phillipsburg 6W 8N 4W 4S</u>			COUNTY <u>Phillips</u>	STATE <u>Ks</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Shields Drly

TYPE OF JOB Surface

HOLE SIZE 12 1/4 T.D. 211

CASING SIZE 8 3/8 DEPTH 208

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 10-15

PERFS. _____

DISPLACEMENT 18# 13 BBL

EQUIPMENT

153 Dave

PUMP TRUCK CEMENTER Mark

_____ HELPER _____

BULK TRUCK

_____ DRIVER _____

BULK TRUCK

160 DRIVER Darin

REMARKS: Cement in cellar

CHARGE TO: Throughbred Associates

STREET 10 Colonial Court

CITY Wichita STATE Kan ZIP 67207

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.

SIGNATURE Burton Beery

OWNER _____

CEMENT AMOUNT ORDERED 150⁶⁰ 40 390cc 2% gel

COMMON	<u>90</u>	@	<u>6.35</u>	<u>571.50</u>
POZMIX	<u>60</u>	@	<u>3.25</u>	<u>195.00</u>
GEL	<u>3</u>	@	<u>9.50</u>	<u>28.50</u>
CHLORIDE	<u>5</u>	@	<u>28.00</u>	<u>140.00</u>
RELEASED		@		
JAN 29 1999		@		
FROM CONFIDENTIAL		@		
HANDLING	<u>105</u>	@		<u>157.50</u>
MILEAGE <u>78</u>	<u>04</u>			<u>468.00</u>
				TOTAL <u>1560.50</u>

CONFIDENTIAL SERVICE

JAN 2

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>470.00</u>
EXTRA FOOTAGE	@		
MILEAGE <u>78</u>	@	<u>2.85</u>	<u>222.30</u>
PLUG <u>8 1/2 wooden</u>	@		<u>45.00</u>
TOTAL <u>737.30</u>			

FLOAT EQUIPMENT

_____	@		
_____	@		
_____	@		
_____	@		
_____	@		

TOTAL _____

TAX _____

TOTAL CHARGE JAN 7 1998

DISCOUNT _____ IF PAID IN 30 DAYS

PRINTED NAME Burton Beery

ALLIED CEMENTING CO., INC.

9341

Federal Tax I.D.# [REDACTED]

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

SERVICE POINT: R

ORIGINAL

DATE <u>12/5/97</u>	SEC. <u>11</u>	TWP. <u>25</u>	RANGE <u>19 W</u>	CALLED OUT	ON LOCATION	JOB START <u>2:00 AM</u>	JOB FINISH <u>5:00 AM</u>
LEASE <u>Mausley</u>		WELL # <u>1</u>	LOCATION <u>Speed 15 N 14w 2 S</u>			COUNTY <u>Phillips</u>	STATE <u>Ks</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR Shields Drly

TYPE OF JOB plug

HOLE SIZE 7 1/4 T.D. 3620

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH RELEASED

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT JAN 29 1999

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT

AMOUNT ORDERED 200 @ 6% gel
1/4 lb flow seal

COMMON	<u>120</u>	@	<u>6.35</u>	<u>762.00</u>
POZMIX	<u>80</u>	@	<u>3.25</u>	<u>260.00</u>
GEL	<u>10</u>	@	<u>9.50</u>	<u>95.00</u>
CHLORIDE		@		
<u>Flow seal</u>	<u>25 #</u>	@	<u>1.15</u>	<u>28.75</u>
		@		
		@		
		@		
		@		
HANDLING		@	<u>1.05</u>	<u>210.00</u>
MILEAGE	<u>44 / Sh / mile</u>			<u>568.00</u>
TOTAL				<u>1923.75</u>

EQUIPMENT

153 Dave

PUMP TRUCK CEMENTER Mark

_____ HELPER _____

BULK TRUCK

_____ DRIVER _____

BULK TRUCK

160 DRIVER Darin

REMARKS:

25 sk @ 1840

100 @ 1250

40 @ 260

10 @ 40 w/c plug

15 Rat hole

10 mouse hole

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 470.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 71 @ 2.85 202.35

PLUG 858 Dry hole @ _____ 23.00

_____ @ _____

_____ @ _____

TOTAL 695.35

CHARGE TO: Throughbred Associates

STREET P.O. Box 97

CITY Ellinwood STATE Kan ZIP 67526

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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.

SIGNATURE [Signature]

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED BY
STATE COMMISSION
PRINTED NAME
JAN 7 1998