**WELL COMPLETION FORM**

### WELL HISTORY - DESCRIPTION OF WELL & LEASE

**Operator:** License # 33168

**Name:** WOOLSEY OPERATING COMPANY, LLC

**Address:** 125 N. Market, Suite 1000

**City/State/Zip:** Wichita, Kansas 67202-1775

**Purchaser:** Plains Marketing

**Operator Contact Person:** Dean Pattisson, Operations Manager

**Phone:** (316) 267-4379 ext 107

**Contractor:** Name: Duke Drilling Co., Inc.

**License:** 5929

**Wellsite Geologist:** Brad Rine

**Designate Type of Completion:**
- [ ] New Well
- [ ] Re-Entry
- [ ] Workover
- [ ] Oil
- [ ] SWD
- [ ] S1OW
- [ ] Temp. Abd.
- [ ] Gas
- [ ] ENHR
- [ ] SIGW
- [ ] Dry
- [ ] Other (Core, WSW, Expl., Cathodic, etc)

**If Workover/Re-entry:** Old Well Info as follows:

**Operator:** n/a

**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.**

**06/24/04**

**Spud Date or Recompletion Date**

**07/04/04**

**Date Reached TD**

**08/24/04**

**Completion Date or Recompletion Date**

**API No.** 007-22828-30-00

**County:** Barber

**Sec.** 32 **Twp.** 32 **S. R.** 12

**Footages Calculated From:**

- **540' FSL** feet from **S** / **N** (circle one) Line of Section
- **330' FWL** feet from **E** / **W** (circle one) Line of Section

**Nearest Outside Section Corner:**

- **(circle one) NE** / **SE** / **NW** / **SW**

**Lease Name:** BARTHOLOW A

**Well #:** 1

**Field Name:** Medicine Lodge-Boggs

**Producing Formation:** Mississippian

**Elevation:** Ground: 1812

**Kelly Bushing:** 1823

**Total Depth:** 5186

**Plug Back Total Depth:** 4820

**Amount of Surface Pipe Set and Cemented at:** 221

**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**

(Data must be collected from the Reserve Pit)

**Chloride content:** 30,000 ppm

**Fluid volume:** 2000 bbls

**Dewatering method used:** Haul off free fluids and allow to dehydrate

**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.:**

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**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 sides 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:**

Dean Pattisson, Operations Manager

**Date:** October 22, 2004

**Subscribed and sworn to before me this 22nd day of October 2004**

**Notary Public:** Debra K. Clingan

**Date Commission Expires:** March 15, 2006

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**KCC Office Use ONLY**

- [ ] Letter of Confidentiality Attached
- [ ] If Denied, Yes [ ] Date:
- [ ] Wireline Log Received
- [ ] Geologist Report Received
- [ ] UIC Distribution

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**DEBRA K. CLINGAN**

**NOTARY PUBLIC**

**STATE OF KANSAS**

**My Appl. Exp.**