

14-0529W

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

Operator: License # 5393

Name: A. L. Abercrombie, Inc.

Address 150 N. Main, Suite 801

City/State/Zip Wichita, KS 67202

Purchaser: Koch Oil Co.

Operator Contact Person: Mark R. Galyon

Phone (316) 262-1841

Contractor: Name: Abercrombie RTD, Inc.

License: 30684

Wellsite Geologist: Mark Galyon

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, USW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to inj. SWD
 Plug Back PBSD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

1-15-93 1-22-93 2-26-93
Spud Date Date Reached TD Completion Date

API NO. 15- 063-21,449

County Gove

165' S/2 - NE - NE - Sec. 14 Twp. 15S Rge. 29 X E V

4290' Feet from (S) (circle one) Line of Section

495' Feet from (E) (circle one) Line of Section

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

Lease Name Miller 'B' Well # 6-14

Field Name Millsack

Producing Formation L/KC

Elevation: Ground 2484' KB 2489'

Total Depth 3970' PBSD 3906'

Amount of Surface Pipe Set and Cemented at 265' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1004' Feet

If Alternate II completion, cement circulated from 1004'

feet depth to surface w/ 300 sx cmt.

Drilling Fluid Management Plan DLT-4-5-89
(Data must be collected from the Reserve Pit)

Chloride content 7,000 ppm Fluid volume 640 bbls

Dewatering method used evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name N/A

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 which 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 Mark R. Galyon

Title Vice President

RECEIVED STATE CORPORATION COMMISSION MAR 19 1993

Subscribed and sworn to before me this 18th day of March 19 93.

Notary Public Angela Woodard

Date Commission Expires 3-20-93

ANGELA WOODARD
Notary Public - State of Kansas
My Admt Expires 3-20-93

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

Operator Name A. L. Abercrombie, Inc. Lease Name Miller 'B' Well # 6-14

Sec. 14 Twp. 15S Rge. 29
 East
 West

County Gove

COPY

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 Datum	<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	Anhydrite	1912'	(+582')
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	B/Anhydrite	1943'	(+551')
List All E.Logs Run:		Heebner	3579'	(-1085')
		Toronto	3601'	(-1107')
		Lansing	3618'	(-1124')
		Muncie Creek	3783'	(-1289')
		Stark Shale	3864'	(-1370')
		Hushpuckney	3884'	(-1390')
		LTD	3972'	(-1478')

DST's on attached sheet

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"	20#	265'	60-40 posmix	200	2% gel 3% cc
Production	7 7/8"	4 1/2"	9.5#	3970'	50-50 posmix Common	80 100	2% gel, 7 1/2# gel/sx 1.7# D-29/sx
Top Stage D.V. Tool				1004'	60-40 posmix	300	6% gel

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
	45	3913'-3914 1/2'		1000 gallons 15% INS	
	CIBP @ 3906'				
4	3892'-3898'		750 gallons 15%		3906'

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8	3904			

Date of First, Resumed Production, SWD or Inj. 2-26-93	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	50		3		34

Disposition of Gas: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	Production Interval 3892'-3898'
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