

Red

947

COPY

SIDE ONE

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

API NO. 15- 165-21,569

County Rush

SE SW SE Sec. 32 Twp. 16 Rge. 19 X East West

380' Ft. North from Southeast Corner of Section

1900' Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Littler Well # 4

Field Name Hampton - NE

Producing Formation Arbuckle

Elevation: Ground 2048' KB 2053'

Total Depth 3822' PBTD 3830'

Operator: License # 5815

Name: C & R Drilling

Address 410 17th St., Suite 1140

City/State/Zip Denver, Colorado 80202

Purchaser: _____

Operator Contact Person: Les Olson

Phone (303) 623-6144

Contractor: Name: Western Kansas Drilling, Inc.

License: 4083 STATE CORPORATION COMMISSION

Wellsite Geologist: Bill Robertson

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

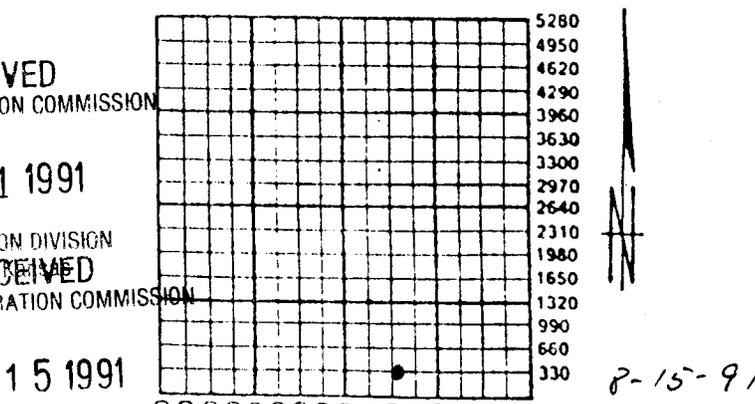
If **OWO**: old well info as follows:
Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable

5-24-91 5-31-91 6-1-91
Spud Date Date Reached TD Completion Date



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JUL 15 1991

Wichita, Kansas

Amount of Surface Pipe Set and Cemented at 371' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1310' Feet

If Alternate II completion, cement circulated from 1310'

feet depth to surface w/ 250 sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 William H. Reeling

Title Vice President Date 6/26/91

Subscribed and sworn to before me this 26th day of June, 1991.

Notary Public Leslie Olson
Notary Public, State of Colorado
County of Arapahoe

Date Commission Expires _____
My Commission Expires July 18, 1994

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	Drillers Timelog Received
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other (Specify)

SIDE TWO

Operator Name C & R Drilling Lease Name Littler Well # 4
 Sec. 32 Twp. 16 Rge. 19 East West
 County Rush

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	Formation Description <input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Bottom</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>1278'</td> <td></td> </tr> <tr> <td>Heebner</td> <td>3382'</td> <td></td> </tr> <tr> <td>"B" zone</td> <td>3454'</td> <td></td> </tr> <tr> <td>"J" zone</td> <td>3616'</td> <td></td> </tr> <tr> <td>B-KC</td> <td></td> <td>3686'</td> </tr> <tr> <td>Arbuckle</td> <td>3799'</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Anhydrite	1278'		Heebner	3382'		"B" zone	3454'		"J" zone	3616'		B-KC		3686'	Arbuckle	3799'	
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"J" zone	3616'																						
B-KC		3686'																					
Arbuckle	3799'																						
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																						
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																						
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																						

DST #1 3787'-3817' 45-45-60-45
 IFP 89-97#, FFP 105-114#
 ISIP 1160#, FSIP 1151#
 Rec. 150' GOCM, 30' Gas above fluid
 DST #2 3787'-3822' 45-45-60-45
 IFP 65-81#, FFP 89-114#
 ISIP 1176#, FSIP 1160#
 Rec. 185' GOCM, 60' Gas above fluid

CASING RECORD New 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#	371'	60/40 poz	175sks	3%cc 2%gel
Production	7 7/8	4 1/2		3804'	60/40 poz.	150sks	10% salt, 1/2% CFR3 2% gel, 300gal.
					HLC 1/4#Flocele	250 sk.	Super flush

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
		250 gallons mud acid	3804'-3822'

TUBING RECORD
 Size 2 3/8" Set At 3807' Packer At _____ Liner Run Yes No

Date of First Production 6/11/91 Producing Method Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	40		10		41

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

METHOD OF COMPLETION Open Hole Perforation Dually Completed Commingled
 Other (Specify) _____

Production Interval _____