

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

Operator: License # 4767
Name: Ritchie Exploration, Inc.
Address P.O. Box 783188
Wichita, KS 67278
Purchaser: Texaco
Operator Contact Person: Lisa Thimmesch
Phone (316) 691-9500
Contractor: Name: Plains
License: 4072
Wellsite Geologist: _____

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

If Workover:
Operator: Ritchie Exploration, Inc.
Well Name: #1 O'Rourke
Comp. Date 10-89 Old Total Depth 4354
 Deepening Re-perf. Conv. to Inj/SwD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
3-27-97 4-1-97
Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

API NO. 15- 135-23,3880001
County Ness
NE - NW - SW - Sec. 17 Twp. 16 Rge. 21W ^EW
2310 Feet from S/N (circle one) Line of Section
4290 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 O'Rourke Well # 1
Field Name _____
Producing Formation Cherokee
Elevation: Ground 2339 KB 2344
Total Depth 4350 PBTB _____
Amount of Surface Pipe Set and Cemented at _____ 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 REWORK JK 6-9-97
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite:
RELEASED
Operator Name _____
Lease Name SEP 16 1998 License No. _____
FROM CONFIDENTIAL S Rng. _____ E/W
County _____ Docket No. _____

SMK

COPY

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.

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 [Signature]
Title President Date 5/29/97
Subscribed and sworn to before me this 29th day of May, 19 97.
Notary Public Lisa Thimmesch
Commission Expires _____

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

LISA THIMMESCH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 8-29-99

Operator Name Ritchie Exploration, Inc. Lease Name O'Rourke Well # 1
 Sec. 17 Twp. 16 Rge. 21W East West
 County Ness

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 sheets if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

List All E.Logs Run:

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

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth	Type of Cement	#Sacks Used	Type and Percent Additives
	Top Bottom			

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
3	4241'-43' Cherokee (NEW PERFS)	1000 gal 7.5% Pentol 200	Cherokee
3	4237.5'-4241' (OLD PERFS)		

TUBING RECORD		Size <u>2 3/8"</u>	Set At <u>4306</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj. <u>4-1-97</u>		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>3.46</u> Bbls.	Gas <u> </u> Mcf	Water <u>42</u> 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 4237.5'-4241'
 Other (Specify) _____

Production Interval