

33-16S-25W

COPY ORIGINAL

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

ORIGINAL

API NO. 15- 135-21449 0001
County Ness
- NE -SW Sec. 33 Twp. 16S Rge. 25W
1980 Feet from S (circle one) Line of Section
1980 Feet from E (circle one) Line of Section

Operator: License # 30163
Name: Great Plains Petroleum, Inc.
Address 1902 E. Waterman
City/State/Zip Wichita, KS 67211
Purchaser: Coastal States Trading
Operator Contact Person: Rod A. Phares
Phone (316) 264-3667
Contractor: Name: Plains Well Service
License: 4072

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Rupp "A" Well # 3
Field Name XXXXXX Arnold SW
Producing Formation Ft. Scott/Mississippian
Elevation: Ground 2556 KB 2561
Total Depth 4550 PBDT 4543
Amount of Surface Pipe Set and Cemented at 302 Feet
Multiple Stage Cementing Collar Used? Yes X No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Wellsite Geologist: _____
Designate Type of Completion
_____ New Well _____ Re-Entry X Workover
X Oil _____ SWD _____ SIOW _____ Temp. Abd.
_____ Gas _____ ENHR _____ SIGW
_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

Drilling Fluid Management Plan REWORK 9/4 7-9-96
(Data must be collected from the Reserve Pit)

If Workover:
Operator: Liberty Enterprises
Well Name: Rupp "A" #3
Comp. Date 6/7/78 Old Total Depth 4550
_____ Deepening X Re-perf. _____ Conv. to Inj/SWD
_____ Plug Back _____ PBDT
X Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____
4/1/96 4/1/96 4/4/96
Spud Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
Quarter Sec. Twp. S Rng. E/W
County _____ Docket No. _____

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.

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 Rod A. Phares
Title President Date 7/2/96
Subscribed and sworn to before me this 2nd day of July,
19 96.
Notary Public Melaina J. Volz
My Commission Expires 7-15-96

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) 076

MELAINA T. VOLZ
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 7-15-96

JUL 03 1996

CONSERVATION DIVISION
WICHITA, KS

Operator Name Great Plains Petroleum

SIDE TWO

Lease Name Rupp "A"

Well # 3

Sec. 33 Twp. 16S Rge. 25W

East

County Ness

West

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 Yes No
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run: None

Log Formation (Top), Depth and Datum Sample
Name Top Datum

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

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
4	Pf FTSC 4390-4394. RIH w/ pkr & plug. Set plug @ 4444.	
	Set pkr @ 4360. Treat FTSC w/ 1000 gals 15% MCA. Swab SO.	
	Retreat FTSC w/ 1500 gals 15% gelled acid. Swab GSO.	
	Retrieve pkr & plug. POP (commingled).	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-7/8	4541	None	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj.	Producing Method
4/5/96	<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 Bbls.	Gas None Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	16 BOPD (was 2 BOPD)		48 BOPD		40

Disposition of Gas: METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 4390-4394 (FTSC)

(If vented, submit ACO-18.) Other (Specify) _____ 4490-4518 (MSP)