

Stich

COPY

1804

SIDE ONE

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

Operator: License # 7696

Name: Stich Oil

Address R.R. 1, Box 132

City/State/Zip Chanute, KS 66720

Purchaser: Crude Marketing

Operator Contact Person: Frank Stich

Phone (316), 763-2459

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWMO: old well, info as follows:

Operator: Standard Metal Corp

Well Name: Greve #2

Comp. Date 9/64 Old Total Depth 731

Drilling Method:

Mud Rotary Air Rotary Cable

2/5/90 2/10/90 2/10/90

Spud Date Date Reached TD Completion Date

API NO. 15- 133-01,014

County neosho

W 1/4 of NE 1/4 Sec. 35 Twp. 28 Rge. 18 East West

4950 Ft. North from Southeast Corner of Section

1485 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

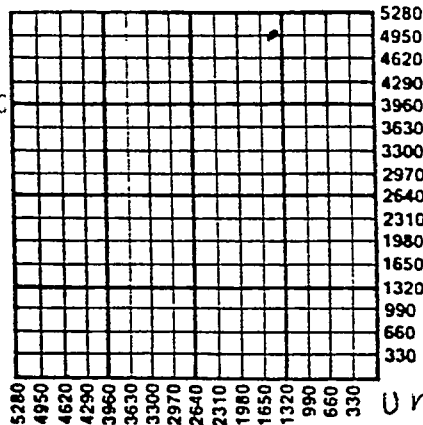
Lease Name Stich Well # 2

Field Name Urbana

Producing Formation Bartlesville

Elevation: Ground _____ KB _____

Total Depth 725 PBDT _____



FEB 15 1991

*Unconfirmed
dit II*

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1

feet depth to 731 w/ N/A 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.

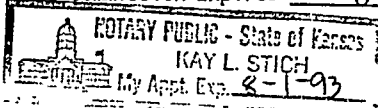
Signature *K. L. Stich*

Title owner Date 2-12-91

Subscribed and sworn to before me this 12 day of February, 1991.

Notary Public *Kay L. Stich*

Date Commission Expires 8-1-93



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
 C Wireline Log Received
 C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other *I.S.*
 (Specify)

SIDE TWO

Operator Name Stich Oil Lease Name Stich Well # 2
 Sec. 35 Twp. 28 Rge. 18 East West
 County Neosho

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.)

Formation Description

Log Sample

Name _____ Top _____ Bottom _____

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
N/A							

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
N/A			

TUBING RECORD Size _____ Set At _____ Packer At _____ Liner Run Yes No

Date of First Production 5/1/90 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	$\frac{1}{2}$	None	15		29.00

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 _____