

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

Operator License # 30730

Name: Horizontal Development & Production, Inc.
Address: 23077 Pedernales Canyon Trail
City/State/Zip: Spicewood, TX 78669

Purchaser: _____

Operator Contact Person: Mark Hill

Phone: (512) 264-3011

Contractor Name: McGown Drilling

License: 5786

Wellsite Geologist: Mike Sternberg

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Spud Date: _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back _____ PBTD

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

11/26/97 _____ 11/26/97 _____ 12/05/97 _____
Spud Date Date Reached TD Completion Date

COPY

API NO. 15-087-205680000

County Jefferson

90°N of S/2 N/2 NE Sec. 10 Twp. 10S Rge. 19E

4380 Feet from (S)/N (circle one) Line of Section

1320 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 _____ Nickels _____ Well #1

Field Name _____ Wildcat _____

Producing Formation _____ McLouth Sand _____

Elevation: _____ Ground 1120' _____ KB _____

Total Depth _____ 1652' _____ PBTD _____

Amount of Surface Pipe Set and Cemented at _____ 42 _____ 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 *DFA, 6-10-98 etc.*
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Gel _____

Location of fluid disposal if hauled offsite:

Operator Name: Horizontal Development & Production Inc.

Lease Name: Jones License No. 30730

90°N of S/2 N/2 NE Quarter Sec. 10 Twp. 10 S Rng. 19 (E)/N

County Jefferson _____ Docket No. _____

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.

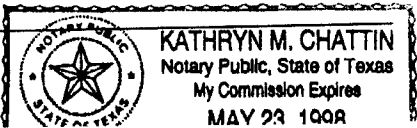
Signature *Mark E. Hill*
(Mark E. Hill)

Title _____ Finance Officer _____ Date 4/24/98

Subscribed and sworn to before me this 24th day of April 1998

Notary Public *Kathryn M. Chatten*

Date 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

SIDE TWO

Operator Name : Horizontal Development & Production, Inc.

Lease Name : _____ Nickels _____ Well 1

Sec. 10 Twp. 10S Rge. 19
 East
 West

County Jefferson

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 : Dual Induction
 Neutron/Density Porosity

Log **Formation (Top), Depth and Datums** Sample

Name	Top	Datum
Lower McLouth	1606	-486
Mississippi	1623	-503

COPY

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"		42'	Straight Cement	32	2% CaCl 2% 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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth

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

Date of First, Resumed Production, SWD or Inj. 2-4-11 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>1-11</u>				

Disposition of Gas : **METHOD OF COMPLETION** Production Interval _____

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

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