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 # 5150

Name: Colt Energy, Inc

Address P.O. Box 388

City/State/Zip Iola, Kansas 66749

Purchaser: Texaco Trading & Transporation

Operator Contact Person: Dennis Kershner

Phone (316) 365-3111

Contractor: Name: Evans Energy Development, Inc.

License: 8509

Wellsite Geologist: None

Designate Type of Completion
X New Well ___ Re-Entry ___ Workover

X Oil ___ SWD ___ Temp. Abd.
___ Gas ___ Inj ___ Delayed Comp.
___ Dry ___ Other (Core, Water Supply, etc.)

If OWWO: old well info as follows:
Operator:

Well Name:

Comp. Date _____ Old Total Depth _____

Drilling Method:
___ Mud Rotary X Air Rotary ___ Cable

7-24-90 Spud Date | 7-26-90 Date Reached TD | 10-17-90 Completion Date

API NO. 15- 045-21,110

County Douglas

NE NW SE Sec. 13 Twp. 14 Rge. 20 X East ___ West

2475 Ft. North from Southeast Corner of Section

1800 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

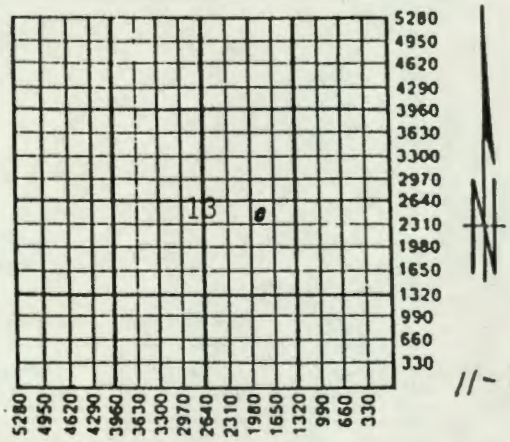
Lease Name Schultz Well # 13

Field Name Vineland

Producing Formation Squirrel

Elevation: Ground Unknown KB ------

Total Depth 815 PBTD 805



11-7-90

Amount of Surface Pipe Set and Cemented at 40.75 Feet

Multiple Stage Cementing Collar Used? _____ Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 805

feet depth to Surface w/ 106 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 Dennis Kershner

SHIRLEY A. STOTLER
Notary Public - State of Kansas
My Appt. Expires 1-30-92

Title Office Manager Date 10-31-90

Subscribed and sworn to before me this 31st day of October, 90.

Notary Public Shirley A. Stotler

Date Commission Expires 1-30-92

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 (Specify)

Form ACO-1 (7-89)

SIDE TWO

Operator Name Colt Energy, Inc. Lease Name Schultz Well # 13

Sec. 13 Twp. 14 Rge. 20 [X] East [ ] West County Douglas

INSIRUCTIONS: 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.) [ ] Yes [X] No

Samples Sent to Geological Survey [ ] Yes [X] No

Cores Taken [X] Yes [ ] No

Electric Log Run (Submit Copy.) [ ] Yes [X] No

Formation Description

[ ] Log [X] Sample

Name	Top	Bottom
See Attached Drillers Log.		

CASING RECORD [X] 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	9 7/8	7"	17	40.75	Neat	10	---
Production	6¼	4½	10.5	805	OWC	106	2% Gel

PERFORATION RECORD Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
1	710-762	15sx - 12x30 sand 55sx - 10x20 sand 60gal. HCL Acid	710-762

TUBING RECORD Size Set At Packer At Liner Run [ ] Yes [ ] No

Date of First Production	Producing Method					
10-20-90	[ ] Flowing [X] Pumping [ ] Gas Lift [ ] Other (Explain)					
Estimated Production Per 24 Hours	**Oil Bbls.**	**Gas Mcf**	**Water Bbls.**	**Gas-Oil Ratio**		**Gravity**
	7		3			21

Disposition of Gas:

[ ] Vented [ ] Sold [X] Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

[ ] Open Hole [X] Perforation [ ] Dually Completed [ ] Commingled

[ ] Other (Specify) _____

Production Interv