

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

Operator: License # 6142
Name Town Oil Co.
Address Rt. 4
Paola, KS. 66071
City/State/Zip

Purchaser Enron Oil Trading Co.

Operator Contact Person Lester Town
Phone 913 294-2125

Contractor: License # 6142
Name Town Oil Co.

Wellsite Geologist
Phone

Designate Type of Completion
 New Well Re-Entry Workover

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

If ONWO: old well info as follows:
Operator
Well Name
Comp. Date
Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

6-2-87 6-4-87 6-4-87
Spud Date Date Reached TD Completion Date

860
Total Depth 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 2 completion, cement circulated
from 42 feet depth to surface, 5 SX cmt
Cement Company Name
Invoice #

045-21,007

API NO. 15-
County Douglas
NW NW 9 14 21
Sec. Twp. Rge. East West

4620 Ft North from Southeast Corner of Section
4380 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

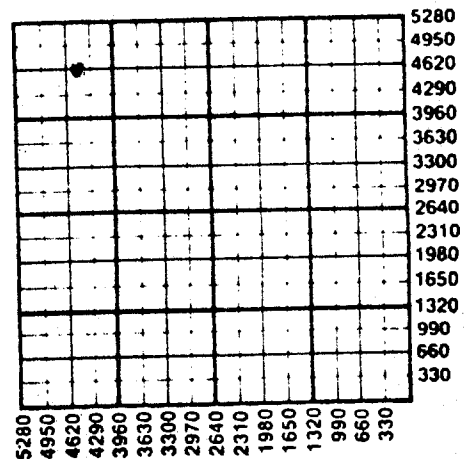
Lease Name Eisele Well #. ?

Field Name

Producing Formation

Elevation: Ground KB

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #

Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West

Other (explain)
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

SIDE TWO

Operator Name Town Oil Co. Lease Name Eisele Well # 2

Sec. 9 Twp. 14 Rge. 21 East West County Douglas

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name Top Bottom

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
Surface	9	6 1/4		42	Portland	5	
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PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth
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.....
.....
.....
TUBING RECORD							
Size	Set At	Packer at	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of First Production		Producing Method		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....			