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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator License # 5682
Name HUGHES DRILLING CO.
Address 122 N. MAIN
City/State/Zip WELLSVILLE, KS. 66092
Purchaser Crude Marketing
Operator Contact Person: Carl C. Hughes
Phone (785) 883-2235
Contractor Name: HUGHES DRILLING CO.
License 5682
Wellsite Geologist: none

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

If Workover/Re-entry. Old Well Info as follows:

Operator _____
Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to Enhr./SWD

Plug Back _____ Plug Back Total Depth _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

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

4/4/00 4/6/00 8/15/00
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 091-22,913

County: JOHNSON

NW NW SE NE Sec. 36 Twp. 14 S. R. 21 East West

37953771 feet from S N (circle one) Line of Section

1005 1006 feet from E W (circle one) Line of Section

Footages Calculated from KCC Record Nearest Outside Section Corner

(circle one) NE SE NW SW

Lease Name: BRAUN Well #: 8-I

Field Name: LONGANECKER SE

Producing Formation: BARTLESVILLE

Elevation: Ground: na Kelly Bushing: _____

Total Depth: 898 880 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 23' Feet

Multiple Stage Cementing Collar Used? Yes No

Logs, show depth set _____ Feet

If Alternate II completion, cement circulated from 890 873 KCC JH

feet depth to surface w/ 101 sx cmt.

Drilling Fluid Management Plan ALT 2 JH 10/19/00
(Data must be collected from the Reserve Pit)

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. R. East West

County: _____ 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 of 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 Carl C. Hughes
Title: partner Date: 8/25/00

Subscribed and sworn to before me this 25 day of August.

Notary Public Kay Caruthers
Date Commission Expires 5-30-03
NOTARY PUBLIC
STATE OF KANSAS
KAY CARUTHERS
My Appt. Exp. 5-30-03

KCC Office Use ONLY

- Letter of Confidentiality Attached
- If Denied, Yes Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution

Operator Name HUGHES DRILLING CO Lease Name: BRAUN Well #: 8-I
 Sec 36 Twp 14 S R 21 East West County: JOHNSON

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HERTHA	XXX 399 407
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	BARTLESVILLE	856 864
List All E. Logs Run			

GAMMA RAY -NEUTRON

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	# Sacs Used	Type and Percent Additives
surface	9 7/8	7	16	23	portland	5	none
production	5 1/4	2 1/2	7	890 873	50/50 poz	101	2% gel

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
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
3	856-863	150 gal. HCL. ACID	856-863

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First Resumerd Production, SWD or Enhr. applying for approval to inj. Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas Vented Sold Used on Lease *(If vented, Sumit ACO-18.)*

METHOD OF COMPLETION Open Hole ~~Open Hole~~ Daily Comp. Commingled

Production Interval 856-863