~~28-14-22~~ 2nd 28-14-22E

SIDE ONE

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 # 9511
Name Alternative Energy Systems, Inc.
Address 508 W. Washington
PO Box 306
City/State/Zip Cuba, Mo. 65453

Purchaser Enron Oil Trading & Trans
PO Box 20108
Shreveport, La. 71120

Operator Contact Person Michael L. Giles
Phone 314-885-2838

Contractor: License # 5335
Name Hawkeye Drilling

Wellsite Geologist Bob Fieller
Phone 913-883-2013

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

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

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

WELL HISTORY

Drilling Method:
X Mud Rotary __ Air Rotary __ Cable

8/16/89 8/31/89 12/8/89
Spud Date Date Reached TD Completion Date

960 956
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 20 feet
Multiple Stage Cementing Collar Used? __ Yes X No
If yes, show depth set feet
If alternate 2 completion, cement circulated
from 956 feet depth to surface w/ 102 SX cmt
Cement Company Name Consolidated
Invoice # 001004322

API NO. 15- 091-22-086

County Johnson

S E Sec 28 Twp 14 Rge 22 X East __ West

1875 Ft North from Southeast Corner of Section
1115 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

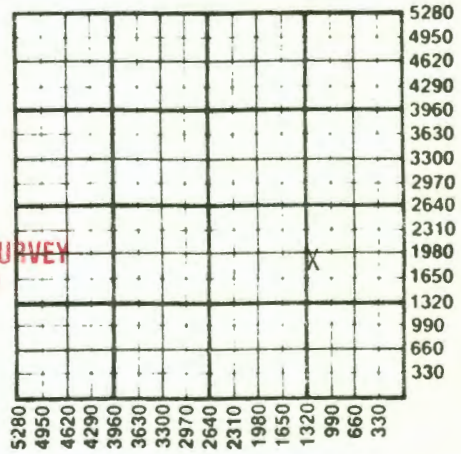
Lease Name Meyers Well # 16A

Field Name Bears and Bulls

Producing Formation Bartlesville

Elevation: Ground 1076 KB 3.5

Section Plat



JAN 03 1990

KANSAS GEOLOGICAL SURVEY
WICHITA BRANCH

WATER SUPPLY INFORMATION

Disposition of Produced Water: __ Disposal
Docket # X 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 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. Submit CP-4 form with

S31658

SIDE TWO

Operator Name Alternative Energy Systems, Inc. Lease Name Meyers Well # 16A

Sec. 28 Twp. 14 Rge. 22 [X] East [ ] West County Johnson

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

Formation Description
[X] Log [ ] Sample

Name	Top	Bottom
Hertha	417	427
Bartlesville	902	916

CASING RECORD [ ] New [X] 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	8 7/8	7		20	Portland	10	None
Production	6	2 7/8	6	956	Oil Well	102	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
2	904-912	Water	

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

Date of First Production | Producing Method [ ] Flowing [ ] Pumping [ ] Gas Lift [ ] Other (explain)

HAWKEYE DRILLING

R.R. 2 Box 73A
Wellsville, Kansas 66092
913-883-2013

28-14-22E
955.0

1 2 3 4 5 6 7 8 9 10

Lease Meyers

Well # #16A. 8-16-89

Elevation 15-091-22,086

Drill Log

Thickness	Formation	Total Depth	Remarks
18	CLAY	18	
4	Lime	22	
8	Shale	30	
2	Lime	32	
22	Shale	54	
28	Lime	82	
10	Shale	92	
7	Lime	99	
10	Shale	109	
21	Lime	130	
16	Shale	146	
20	Lime	166	
11	Shale	177	
6	Lime	183	
16	Shale	199	
3	Lime	202	
8	Shale	210	
18	Lime	228	
20	Shale	248	
10	Lime	258	
2	Shale	260	
2	Lime	262	
21	Shale	283	
8	Lime	291	
3	Shale	300	
10	Lime	310	
47	Shale	357	
3	Lime	360	
8	Shale	368	
21	Lime	389	
1	Shale	390	
4	Lime	394	
8	Shale	402	
12	Lime	414	
3	Shale	417	
10	Lime	427	
148	Shale	575	
4	Lime	579	
18	Shale	597	
6	Lime	603	
2	Shale	605	
4	Lime	609	
6	Shale	615	
8	Lime	623	
5	Shale	628	
4	Lime	632	
1	Shale	633	
4	Lime	637	
5	Shale	642	
5	Lime	647	
5	Shale	652	
3	Lime	655	
15	Shale	670	
5	Lime	675	
12	Shale	687	
2	Lime	689	
16	Shale	705	
2	Lime	711	
88	Shale	799	
5	Lime	804	
25	Shale	829	
4	Blackshale	833	
1	Lime	834	
15	Shale	849	
1	Lime	850	
35	Shale	885	
1	Lime	886	
4	SAND	890	
65	Shale	960 TD	

28-14-22E

DOCKET # E 24,883

CASING MECHANICAL INTEGRITY TEST

Disposal [ ] Enhanced Recovery: ____ ____ ____, Sec 28, T 14 S, R 22 E/W

Repressuring [ ]
Flood [ ]
Tertiary [ ]

1875 Feet from South Section Line
715 Feet from East Section Line

Date injection started ____
API #15 - 071 - 22,086

Lease Hilyers Well # 16A
County Johnson

Operator: Hilt Energy
Name & Address PO Box 304
Cuba, Mo.

Operator License # 9511
Contact Person Mike Giles
Phone ____

Max. Auth. Injection Press. ____ psi; Max. Inj. Rate ____ bbl/d;
If Dual Completion - Injection above production ____ Injection below production ____

	Conductor	Surface	Production	Liner	Tubing
Size	____	4"	2 3/8	____	Size ____
Set at	____	20	956	____	Set at ____
Cement Top	____	0	0	____	Type ____
" Bottom	____	20	956	____	

DV/Perf. ____ TD (and plug back) 960 ft. depth
Packer type ____ Size ____ Set at ____
Zone of injection 886 ft. to ft. 895 Perf. or open hole perf.

Type Mit: Pressure [X] Radioactive Tracer Survey [ ] Temperature Survey [ ]

FIELD DATA

Time: Start 10 Min. 20 Min. 30 Min.

Pressures: 600 600 600 Set up 1
600 lb
____ ____ ____ Set up 2
____ ____ ____ Set up 3

System Pres. during test ____
Annular Pres. during test ____
Fluid loss during test 0 bbls.

RECEIVED
STATE CORPORATION COMMISSION
DEC 2 - 1989
CONSERVATION DIVISION
Wichita, Kansas

Tested: Casing [X] or Casing - Tubing Annulus [ ]

The bottom of the tested zone is shut in with Float Shoe

Test Date 9-12-89 Using Consolidated Company's Equipment

The operator hereby certifies that the zone between ____ feet and ____ feet was the zone tested

Robert Fichter (Signature) Driller (Title)

The results were Satisfactory X, Marginal ____, Not Satisfactory ____

State Agent Jack Kotin Title Pusher Witness: Yes X No ____

REMARKS: ____

[ ] Orgin. Conservation Div.; [ ] KDHE/T; [ ] Dist. Office;

[ ] Computer Update

KCC Form U-7 6/84