

COPY

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 # 5095  
Name W. Williams  
Address R.A. 7.5. 2.2.2  
City/State/Zip 64. 22. 2

Purchaser Ames Production Co.  
2 E. W. 26. 7. 2. 2. 2

Operator Contact Person Tom Williams  
Phone 913-425-1222

Contractor: License # 5885  
Name A. G. G. 10. 2. 2

Wellsite Geologist N. L. A.  
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  
8-9-89 Spud Date  
8-10-89 Date Reached TD  
8-10-89 Completion Date  
942 Total Depth  
940 PBTD

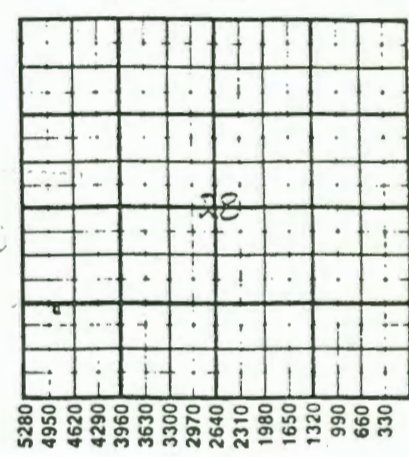
Amount of Surface Pipe Set and Cemented at 35 feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set  
If alternate 2 completion, cement circulated from 20 feet depth to 6 SX cmt  
Cement Company Name S. S. G. 10. 2. 2  
Invoice # 7. 4. 9. 87

API NO. 15- 091-22, 109  
County Johnson  
NW SW SW (Q)  
W. 2. NW 4. 2. 2. Sec. 1. 4. Twp 22. Rge. 2. 2. 2  East  West

1130 Ft North from Southeast Corner of Section  
4915 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

Lease Name Phogley Well # 12  
Field Name Gardner  
Producing Formation Bartlesville  
Elevation: Ground 2070 KB

Section Plat



ALT 2  
PH  
9/20/60

WATER SUPPLY INFORMATION

Disposition of Produced Water:  Disposal  Repressuring  
Docket #

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 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 Debra D. Ruse  
Title Operator Date 8-30-89  
Subscribed and sworn to before me this 1st day of Sept 1989.  
Notary Public Debra D. Ruse  
Date Commission Expires

DEBRA D. RUSE  
STATE WIDE NOTARY PUBLIC  
JOHNSON COUNTY, KANSAS  
My Appointment Expires 6/29/92

K.C.C. OFFICE USE ONLY  
 Letter of Confidentiality Attached  
 Wireline Log Received  
 Drillers Timelog Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)

Operator Name William Production Lease Name Phogley Well # 18

Sec. 28 Twp. 17 Rge. 22  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 of 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

See log

| CASING RECORD <input checked="" 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   | 1 1/2"            | 4 1/4"                    | 2.8#           | 30'           |                |             |                            |
| Production  | 7 5/8"            | 2 7/8"                    | 1.3#           | 940'          | Class A        | 165         | 1% GEL                     |

| PERFORATION RECORD |   | Acid, Fracture, Shot, Cement Squeeze Record |       |
|--------------------|---|---|-------|
| Shots Per Foot     | Specify Footage of Each Interval Perforated | (Amount and Kind of Material Used)          | Depth |
| 9                  | 874' to 882'                                |   |       |

| TUBING RECORD | Size | Set At | Packer at | Liner Run | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------|------|--------|-----------|-----------|---|
|               | NONE |        |           |           |   |

| Date of First Production          | Producing Method   |       |        |               |         |
|-----------------------------------|--|-------|--------|---------------|---------|
|                                   | <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain)..... |       |        |               |         |
| Estimated Production Per 24 Hours | Oil  | Gas   | Water  | Gas-Oil Ratio | Gravity |
|                                   | 10 Bbls  | 0 MCF | 0 Bbls |               |         |

METHOD OF COMPLETION

Production Interval  
874'-882'

Disposition of gas:  Vented  Open Hole  Perforation  
 Sold  Other (Specify) .....  
 Used on Lease  Dually Completed  Commingled

659125