

COPY

MUST BE TYPED

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 # 32294

Name: OSBORN ENERGY L.L.C.

Address: 9401 Indian Creek Pkwy., #40, Suite 440

City/State/Zip Overland Park, KS 66210

Purchaser: AKAWA Natural Gas, L.L.C.

Operator Contact Person: Steve Allee

Phone (913) 327-1831

Contractor: Name: R.S. Glaze Drilling Co.

License: 5885

Wellsite Geologist: Rex Ashlock

Designate Type of Completion

- New Well Re-Entry Workover
- Oil SWD SIOW Temp. Abd.
- Gas ENHR SIGW
- Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening _____ Re-perf. _____ Conv. to Inj/SWD _____

Plug Back _____ PBDT _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

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

Spud Date 5/4/98 Date Reached TD 5/6/98 Completion Date 5/28/98

API NO. 15- 091-228490000

County Johnson

- NE - NE - SE Sec. 16 Twp. 14 Rge. 24 E W

2310 feet from (S)N (circle one) Line of Section

330 feet from (E)W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner

NE, (SE), NW or SW (circle one)

Lease Name Garrett Well # 1-16

Field Name un-named

Producing Formation N/A

Elevation: Ground 1068' KB _____

Total Depth 1360' PBDT _____

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set N/A Feet

If Alternate II completion, cement circulated from 1265

feet depth to surface w/ 221 sx cmt.

Drilling Fluid Management Plan AH-2, 11-18-98 U.C.
(Data must be collected from the Reserve Pit)

Chloride content NA ppm Fluid volume 550 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S Rng. E/W

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 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 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 [Signature]
Title Geologist Date 10-20-98

Subscribed and sworn to before me this 20th day of October, 19 98.

Notary Public Susan L Forward

Notary Commission Expires 4-10-02

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Geologist Report Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other (Specify) IS

SUSAN L FORWARD
Notary Public
State of Kansas
My Appt. Expires 4-10-02

COPY

SIDE TWO

Operator Name Osborn Energy, L.L.C. Lease Name Garrett Well # 1-16

Sec. 16 Twp. 14 Rge. 24 East County Johnson
 West

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input 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	Drillers Log Attached		
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E.Logs Run: Neutron/Density Porosity and Dual Induction				

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	# Sacks Used	Type and Percent Additives
Surface	10 3/4"	8 5/8"	24.0	20'	Portland	8	None
Production	6 3/4"	4 1/2"	9.5	1266.5	50/50 Poz	221	2% gel, 3% gil, and 1% flo-seal

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
4	1012-1014	50 gal 15% HCl/fracture 30K, sand	1012 1014

TUBING RECORD

Size 2 3/8" Set At 1255' Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. N/A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil <u>N/A</u> Bbl.	Gas <u>125</u> Mcf	Water <u>125</u> Bbls.	Gas-Oil Ratio	Gravity
-----------------------------------	---------------------	--------------------	------------------------	---------------	---------

Disposition of Gas Vented Sold Used on Lease

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval _____

(If vented, submit ACO-18.) Other (Specify) _____