

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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

Operator: License # 04567

Name: Douglas G. Evans

Address P.O. BOX 128

City/State/Zip Wellsville KS 66092

Purchaser: EOTT

Operator Contact Person: Douglas G. Evans

Phone (913) 883-4057

Contractor: Name: Evans Energy Dev., Inc.

License: 8509

Wellbit: Geologist: NONE

Designate Type of Completion

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

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

- Deepening
- Plug Back
- Commingled
- Dual Completion
- Other (SWD or Inj?)
- Re-perf.
- Conv. to Inj/SWD
- PBTB
- Docket No. _____
- Docket No. _____
- Docket No. E25372

7-9-97 7-10-97 7-30-97

Spud Date Date Reached TD Completion Date

API NO. 15- 091-227650000

County Johnson

SE - NW - NE - NE Sec. 12 Twp. 15 Rge. 21E

483.4760 Feet from (3) (circle one) Line of Section

954.880 Feet from (0) (circle one) Line of Section

KCC Record
Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

Lease Name ROSS Well # I-3

Field Name Gardner-Edgerton

Repressured
Producing Formation Bartlesville

Elevation: Ground NA KS _____

Total Depth 880 PBTB _____

Amount of Surface Pipe Set and Cemented at 22.5 Ft

Multiple Stage Cementing Collar Used? Yes X

If yes, show depth set _____ Ft

If Alternate II completion, cement circulated from 874.85

feet depth to Surface w/ 122 sz cm

Drilling Fluid Management Plan AIF-224-39800
(Data must be collected from the Reserve P.A.)

Chloride content _____ ppm Fluid volume _____ bb

De-watering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ (License No. _____)

Quarter _____ Sec. _____ Twp. _____ Rge. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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-6 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 Douglas G. Evans

Title Operator Date 8/20/97

Subscribed and sworn to before me this 20 day of August, 19 97.

Notary Public Kimberly Fry

Date Commission Expires 11/12/2000

K.C.C. OFFICE USE ONLY	
F	Letter of Confidentiality Attached
C	<u>E</u> Wireline Log Received
C	Geologist Report Received
Distribution	
<input checked="" type="checkbox"/> KCC	<u>Vem</u> SWD/Rep
<input type="checkbox"/> KGS	Plug
	<input checked="" type="checkbox"/> K&PA
	Other (Specify) <u>TS</u>



1111190

SIDE TWO

Operator Name Douglas G. Evans Lease Name Ross Well # I-3
 Sec. 12 Twp. 15 Rge. 21 East West
 County Franklin

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
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)

List All E.Logs Run:

GAMMA RAY- Neutron

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 Kansas City 361 375
 Bartlesville 826 845

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	9 7/8	6 5/8		22.5	Portland	5	
Production	5 5/8	2 7/8		874.85	50/50Poz	122	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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
	824.5' - 834.5'		
	21 shots		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	1"	22.5	NA	<input type="checkbox"/> Yes <input type="checkbox"/> No

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

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravls.
	1	0	1		

Disposition of Gas: Trace
 Vented Sold Used on Lease
 (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Cemented

injection production interval
824.5'
0 24 P 1