ORIGINAL

FORM 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

API NO. 15-091-227740000

Operator: License # 5885

County JOHNSON

Name: R. S. GLAZE DRILLING CO.

N½ - NW - SW - NE Sec. 14 Twp. 15 Rge. 24 X E W

Address 22139 S. VICTORY ROAD

3950 Feet from S/N (circle one) Line of Section

2310 Feet from E/W (circle one) Line of Section

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

City/State/Zip SPRING HILL, KS 66083

Lease Name TOM MEYERS Well # 2

Purchaser: NONE

Field Name OSBORNSVILLE

Operator Contact Person: ALVA G. GLAZE

Producing Formation BARTLESVILLE

Phone (913) 592-2033

Elevation: Ground 1000 KB ---

Contractor: Name: R. S. GLAZE DRILLING CO.

Total Depth 860 PBTD ----------

License: 5885

Amount of Surface Pipe Set and Cemented at 21 Feet

Wellsite Geologist: NONE

Multiple Stage Cementing Collar Used? ____ Yes X No

If yes, show depth set ____ Feet

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

If Alternate II completion, cement circulated from 860'

feet depth to surface w/ ____ sx cmt.

X Oil ____ SWD ____ SIOW ____ Temp. Abd.
X Gas ____ ENHR X SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

Workover/Reentry: Old Well Info as follows:

Operator:

Well Name:

Comp. Date ____ Old Total Depth ____

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

6-25-97 6-27-97 6-27-97
Spud Date Date Reached TD Completion Date

Drilling Fluid Management Plan
(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 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

Title OWNER Date 2/9/98

Subscribed and sworn to before me this 9th day of February 19 98.

Notary Public

Date Commission Expires

DAVID B. DUNMIRE
NOTARY PUBLIC

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)

STATE CORPORATION COMMISSION
FEB 18 1998

Form ACO-1 (7-91)