

ORIGINAL COPY

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

API NO. 15- 059-248440000
County Franklin plugged 7-2-97
CNW. SE. SE. NW sec. 12 Twp. 16 Rge. 20
3240 Feet from S/N (circle one) Line of Section
3240 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 DeBrabander Well # 3
Field Name _____
Producing Formation Bartlesville
Elevation: Ground NA KB _____
Total Depth 900 PBTD _____
Amount of Surface Pipe Set and Cemented at 22 F
Multiple Stage Cementing Collar Used? Yes X
If yes, show depth set _____ F
If Alternate II completion, cement circulated from 22
feet depth to Surface w/ 5 ss c
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ Fluid volume _____ b
Devastating method used _____
Location of fluid disposal if hauled offsite:
OCT 28 1997
Operator Name _____
Lease Name CONSERVATION DIVISION
WICHITA, KS License No. _____
Quarter Sec. Twp. Rng. E/
County _____ Docket No. _____

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 SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, VSV, Expl., Cathodic, etc)

If Workover/Re-Entry; 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. _____
6-30-97 7-2-97 7-2-97
Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Coler 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 CELESTIAL 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 Douglas G. Evans
Title President/Operator Date 7/2/97
Subscribed and sworn to before me this 2 day of July
19 97.
Notary Public Kimberly S. Fry
Date Commission Expires 11/12/2000

E.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 ECC SWD/Rep RCRA
 ESS Plug Other (Specify)

NOTARY PUBLIC - State of Kansas
KIMBERLY S. FRY
My Appt. Exp. _____

SIDE TWO

Operator Name Douglas G. Evans Lease Name DeBrabander Well # 3
 Sec. 12 Twp. 16 Rge. 20 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Kansas City	398	410
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Squirrel	724	743
List All E. Logs Run:				

CASING RECORD <input 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	9 7/8	6 1/4		22	Portland	5	

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
	DRY HOLE			

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SVD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<i>N/A</i>				

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Cemented

Production Interval _____