

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

API NO. 15- ~~121-27388~~ 27,387

County Miami

~~SW~~-SE- SW Sec. 13 Twp. 16 Rge. 21 E

Operator: License # 6142

275-153 Feet from SW (circle one) Line of Section

Name: Town Oil Co.

3540324 Feet from EW (circle one) Line of Section

Address 16205 W. 287th St.

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

Paola, Ks. 66071

Lease Name NUIT Well # BW-3A

City/State/Zip

Field Name Paola Rantoul

Purchaser: Crude Marketing, Inc.

Repressured
Producing Formation Squirrel

Operator Contact Person: Lester Town

Elevation: Ground _____ KB _____

Phone (913) 294-2125

Total Depth 722 PBTD _____

Contractor: Name: Company Tools

Amount of Surface Pipe Set and Cemented at 20 Fe

License:

Multiple Stage Cementing Collar Used? Yes No

Wellsite Geologist:

If yes, show depth set _____ Fe

Designate Type of Completion
 New Well _____ Re-Entry _____ Workover _____

If Alternate II completion, cement circulated from 707

Oil _____ SWD _____ SIOW _____ Temp. Abd. _____

feet depth to surface w/ 110 surface _____ sx cm

Gas ENHR _____ SIGW _____

Drilling Fluid Management Plan A17.2
(Data must be collected from the Reserve Plot)

Dry _____ Other (Core, WSW, Expl., Cathodic, etc) _____

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

Chloride content _____ ppm Fluid Volume _____ bb

Operator:

Dewatering method used _____

Well Name:

Location of fluid disposal if hauled offsite: _____

Comp. Date _____ Old Total Depth _____

Operator Name _____

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

Plug Back _____ PBTD _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. E18332

4-1-96 4-4-96 12-19-96

Spud Date Date Reached TD Completion Date

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, 200 Colored 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 1 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 Roberta Town

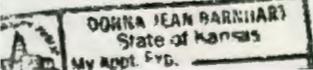
Title Agent Date 3-12-97

Subscribed and sworn to before me this 12 day of March 1997.

Notary Public Norma Jean Barnhart

Date Commission Expires 4-25-97

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



Operator Name Town Oil Co. Lease Name NUTT Well # BW-3A
 Sec. 13 Twp. 16 Rge. 21 East West
 County Miami

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests in interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static 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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

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		6 1/4		20	Portland	3	
Completion		2 7/8		707	Portland	110	

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
2	680-690		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
None				

Date of First, Resumed Production, SWD 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 Grav

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify)

injection Production Interval 680-690'