

COPY

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

Operator: License # 5959 Name: Rader Oil Co. Address: 453 E. 2200 Rd. City/State/Zip: Eudora, Ks. 66025 Purchaser: n/a Operator Contact Person: Richard Rader Phone (913) 883-2885 Contractor: Name: Evans Energy License: 8509 Wellsite Geologist: none Designate Type of Completion: X New Well Re-Entry Workover Oil SWD SLOW Temp. Abd. Gas ENHR SIGW Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows: Operator: N/A Well Name: Comp. Date Old Total Depth Deepening Re-perf. Conv. to Inj/SWD Plug Back PSTD Commingled Docket No. Dual Completion Docket No. Other (SWD or Inj?) Docket No. Spud Date 7-29-96 Date Reached TD 7-31-96 Completion Date 7-31-96

API NO. 15- 059-24819 County Franklin SE SW SW Sec. 32 Twp. 16 Rge. 21 NE (SE) NW or SW (circle one) 480 Feet from (N) (circle one) Line of Section 4394 Feet from (E) (circle one) Line of Section Footages Calculated from Nearest Outside Section Corner: Lease Name Smith Well # 17 Field Name Paola-Rantoul Producing Formation Squirrel Elevation: Ground 910 KB Total Depth 668 PSTB Amount of Surface Pipe Set and Cemented at 22.15 Feet Multiple Stage Cementing Collar Used? Yes X No If yes, show depth set Feet If Alternate II completion, cement circulated from N/A feet depth to w/ sx cmt.

Drilling Fluid Management Plan U.C. 12-19-97 (Data must be collected from the Reserve Pit) Chloride content N/A ppm Fluid volume bbls Dewatering method used Location of fluid disposal if hauled offsite: Operator Name N/A 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-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: Owner Date: 8-5-96 Subscribed and sworn to before me this 7th day of August 1996. Notary Public: [Signature] Date Commission Expires: Feb. 11, 1998



K.C.C. OFFICE USE ONLY F Letter of Confidentiality Attached C Wireline Log Received C Geologist Report Received well Log Distribution KCC SWD/Rep H&PA KGS Plug Other (Specify)

SIDE TMD

Operator Name Rader Oil Co. Lease Name Smith Well # 17
 Sec. 32 Twp. 16 Rge. 21 East County Franklin
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests during 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 Log Formation (Top), Depth and Datum Sample
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No Name Squirrel Top 648 Datum dry
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 List All E.Logs Run:

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 1/4	24	22.15	common	5	none

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			N/A	
<input type="checkbox"/> Plug Back TB				
<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
	N/A	

TUBING RECORD

Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) Open Hole Perf. Dually Comp. Commingled Other (Specify) N/A Production I.