

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

Operator: License # 8701

Name: Triple J inc

Address 225 Megan Lane

City/State/Zip Ottawa, KS 66067

Purchaser: Enron

Operator Contact Person: John Herrick

Phone (913) 242-6423

Contractor: Name: _____

License: _____

Wellsite Geologist: None

Designate Type of Completion

New Well Re-Entry Workover

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

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

Operator: C G Frisby

Well Name: Eneihen #3

Comp. Date ukn Old Total Depth 694'

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

11-10-93 11-29-93
~~START OF WORKOVER~~ Date OF Date Reached TD Completion Date OF WORKOVER

API NO. 15- N/A

County Franklin

NW/4 SW/4 Sec. 5 Twp. 17 Rge. 21E

2070 Feet from SXX (circle one) Line of Section

4680 Feet from EXX (circle one) Line of Section

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

Lease Name Eneihen Well # 3

Field Name Paola - Rantoul

Producing Formation Squirrel

Elevation: Ground _____ KB _____

Total Depth 694' PBTB _____

Amount of Surface Pipe Set and Cemented at 25 Feet

Multiple Stage Cementing Collar Used? Yes No

if yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REWORK JH 6-13-94
(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, 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.

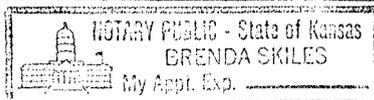
Signature John Herrick

Title owner Date 1-12-94

Subscribed and sworn to before me this 12 day of JAN 19 94.

Notary Public _____

Date Commission Expires 9-27-95



5-17-94
COPY

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C _____ Geologist Report Received
Distribution RECEIVED
J KCC _____ SWD/Rep _____
N KGS _____ Plug _____ Other _____
JAN 24 1994

Operator Name Triple J inc

Lease Name Eneihen

Well # 3

Sec. 5 Twp. 17 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:

Log Formation (Top), Depth and Datums Sample
Name Top Datum

see attached electric log and cement bond log

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	7 1/2"	6 7/8"		25'		5	
intermediate		2 3/8"		688'		81	
production		1"		648'			

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
	perfs from 652' to 656'			
	2 shots per foot			

TUBING RECORD Size 2 3/8" Set At 688' Packer At _____ Liner Run Yes No

Date of First, Resumed Production, (SWD or, Inj.) No Injection Yet; Still Waiting Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil N/A Bbls. Gas N/A Mcf Water Bbls. Gas-Oil Ratio _____ Gravity _____

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

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

Production Interval _____