

COPY

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- 059-24041

County Franklin

NE NW NW Sec. 4 Twp. 18 Rge. 21 East West

5115 Ft. North from Southeast Corner of Section

4125 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Oram Well # 12

Field Name Paola-Rantoul

Producing Formation First Squirrel

Elevation: Ground 960' KB _____

Total Depth 601' or 602' PBDT _____

Operator: License # 7524

Name: Ludovic L. Christopher Jr

Address P.O. Box 71

Rantoul, Kansas, 66079

City/State/Zip _____

Purchaser: Crude Marketing

Operator Contact Person: Same

Phone (816) 942-8646

Contractor: Name: Finch Drilling

License: 5666

Wellsite Geologist: none

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

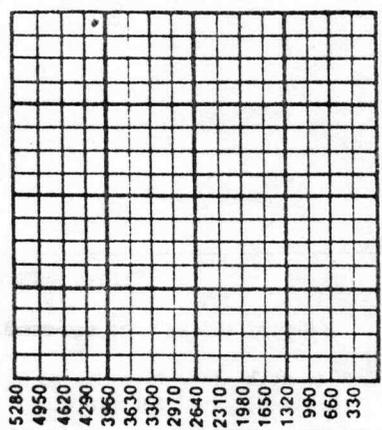
If OWMO: old well info as follows:
Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable

Spud Date _____ Date Reached TD _____ Completion Date _____



Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 602

feet depth to 0 w/ 66 sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Ludovic L. Christopher Jr

Title Owner Date RECEIVED 90

Subscribed and sworn to before me this _____ day of _____, 19 _____

Notary Public _____

Date Commission Expires _____

STATE CORPORATION COMMISSION
AUG 27 1990
CONSERVATION DIVISION
Wichita, Kansas

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify) IS

SIDE TWO

Operator Name Ladovic L. Christopher Jr. Lease Name Oram Well # 12
 Sec. 4 Twp. 18 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">Formation Description</th> </tr> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Bottom</th> </tr> </thead> <tbody> <tr> <td><u>First Spunnel</u></td> <td style="text-align: center;"><u>583</u></td> <td style="text-align: center;"><u>592.5</u></td> </tr> </tbody> </table>	Formation Description			Name	Top	Bottom	<u>First Spunnel</u>	<u>583</u>	<u>592.5</u>
Formation Description										
Name	Top	Bottom								
<u>First Spunnel</u>	<u>583</u>	<u>592.5</u>								

CASING RECORD <input checked="" 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					
<u>Surface Casing</u>	<u>8"</u> <u>5 7/8"</u>	<u>6 1/4"</u> <u>2 7/8"</u>		<u>21'</u> <u>612'</u>	<u>Portland A</u>	<u>2</u> <u>65</u>	<u>No</u> <u>2% Gel</u>					
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record								
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth					
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No								
Date of First Production	Producing Method	Size	Set At	Packer At	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)											

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

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled
 Other (Specify) _____

Production Interval _____