

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

COPY *md*

API NO. 15- 017-20737
County Chase
- NE - SW Sec. 13 Twp. 18 Rge. 6 ^{XX} E
1880 Feet from S (circle one) Line of Section
1980 Feet from E (circle one) Line of Section

Operator: License # 31271

Name: Alpar Resources, Inc.

Address P. O. Box 1046

City/State/Zip Perryton, TX 79070

Purchaser: Bright & Bivins

Operator Contact Person: Debbie Miller

Phone (806) 435-6566

Contractor: Name: JMAR Drilling

License: 31617

Wellsite Geologist: Bryan Pool

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

7-15-95 7-17-95 7-26-95
Start Date Date Reached TD Completion Date

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

Lease Name Horn Well # 9-13

Field Name Diamond Creek

Producing Formation Lansing

Elevation: Ground 1405 KB _____

Total Depth 1485 PBSD 1484

Amount of Surface Pipe Set and Cemented at 208 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 ALT 1 JN 2-19-96
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
KANSAS CORPORATION COMMISSION

Dewatering method used Pump dry & fill.

Location of fluid disposal if hauled off site _____

Operator Name STATE CORPORATION COMMISSION
WICHITA, KS

Lease Name _____ License No. _____

Quarter _____ Sec. _____

County _____ Docket No. _____

CONFIDENTIAL

RECEIVED

RELEASED

MAR 23 1998

FROM CONFIDENTIAL

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 Debbie Miller

Title Proration Analyst Date 8-25-95

Subscribed and sworn to before me this 25 day of August, 19 95.

Notary Public Paula I. Hays

Date Commission Expires 8-24-96

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

PAULA I. HAYS
NOTARY PUBLIC
STATE OF TEXAS
My Comm. Exp. 8-24-96

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NOTARY PUBLIC
STATE OF TEXAS
My Comm. Exp. 8-24-96

Operator Name Alpar Resources, Inc. Lease Name Horn Well # 9-13

Sec. 13 Twp. 18 Rge. 6 East West
 County Chase

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:
 DIL; CNL-FDC; CBL

Name	Formation (Top), Depth and Datum		Sample
	Top	Datum	
OREAD	1144	(+261)	
IRELAND	1254	(+151)	
DOUGLAS	1322	(+ 83)	
LANSING	1410	(- 5)	

CASING RECORD <input type="checkbox"/> New <input checked="" 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	17	208	Class A	85	3% CC
Production	6 1/2	4 1/2	10.5	1484	60/40 Poz	130	gilsonite flocele
					Class A	25	gilsonite gel salt

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose: <u>BRRI CS</u>	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 To				
<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	
	4	1419 - 1426		acidize w/2000 gals. 15%
			NEFE	

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 3/8	1423		
Date of First, Resumed Production, SMD or Inj.			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
7-28-95					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	20	2	30	100	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 1419-1426
 Production Interval
 Other (Specify) _____