

26-19-22E

COPY

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

Operator: License # 3698

Name: J.R. Development

Address 13409 West 105th
Lenexa, KS 66215

City/State/Zip _____

Purchaser: EOTT Energy

Operator Contact Person: J.S. Bider

Phone (913) 492-1761

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

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:

Operator: Northern Oil Exploration

Well Name: Chapman #11

Comp. Date TA'D Old Total Depth 642'

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

10-29-93

10-84

9-26-95

~~SPUD~~ Date of REENTRY Date Reached TD Completion Date

API NO. 15- 107-22309

County Linn

____ - ____ - SW - / 4 Sec. 26 Twp. 19 Rge. 22 ^E _W

990 Feet from (S)N (circle one) Line of Section

4125 Feet from (E)W (circle one) Line of Section

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

Lease Name Chapman "OWWO" Well # 11

Field Name Beagle

Producing Formation Cattlemnan

Elevation: Ground 950 KB _____

Total Depth 641 PBTD _____

Amount of Surface Pipe Set and Cemented at _____ 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 REENTRY 9/24 2-29-96
(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, 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 Jane S Bider

Title PARTNER Date 12-26-95

Subscribed and sworn to before me this 26th day of DECEMBER, 19 95.

Notary Public Diane Pendleton

Date Commission Expires 10/8/97

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

Form ACO-1 (7-91)

Diane Pendleton
Notary Public - State of Kansas
My App. Expires 10/8/97

32-91-12

SIDE TWO

Operator Name J.R. Development Lease Name Chapman Well # 11

Sec. 26 Twp. 19 Rge. 22 East West County Linn

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Cattleman	533.0 587.0	543.0 597.0
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E.Logs Run:	Gamma Ray Neutron			

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

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	533.0-543.0	50 gal 15% HCL	
		35 Sx 12/20, 5 Sx 8/12	
2	587.0-597.0	50 gal 15% HCL	
		35 Sx 12/20, 5 Sx 8/12	

TUBING RECORD		Size <u>1 inch</u>	Set At <u>582'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj. <u>9-26-95</u>		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. <u>1</u>	Gas Mcf	Water Bbls. <u>1</u>	Gas-Oil Ratio	Gravity <u>21.0</u>

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled. 533'-597' O.A.

Production Interval: Other (Specify) _____