

FORM MUST BE TYPED

SIDE ONE

6-19-8E

COPY

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

API NO. 15- 017-20706
County Chase
Lot 6 NW 1/4 Sec. 6 Twp. 19 Rge. 8 X E

Operator: License # 5010
Name: Knighton Oil Company, Inc.
Address 221 South Broadway-#710
city/State/Zip Wichita, Kansas 67202

950 Feet from S/M (circle one) Line of Section
7550 Feet from E/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(NE) SE, NW or SW (circle one)

Purchaser:
Operator Contact Person: Earl M. Knighton, Jr.
Phone (316) 264-7918

Lease Name Davis Trusts Well # 6
Field Name Davis

Contractor: Name: Summit Drilling
License: 30141

Producing Formation Admire and Indian Cave
Elevation: Ground 1382 KB 1393
Total Depth 1679 PBTD 1678

Wellsite Geologist: David D. Montague

Amount of Surface Pipe Set and Cemented at 150 Feet
Multiple Stage Cementing Collar Used? Yes X No
If yes, show depth set _____ Feet

Designate Type of Completion
X New Well _____ Re-Entry _____ Workover _____

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

Oil _____ SWD _____ S10W _____ Temp. Abd.
X Gas _____ ENHR _____ SIGW
_____ Dry _____ Other (Core, VSW, RECEIVED, etc.)

Drilling Fluid Management Plan ALT 1 1-10-96 JK
(Data must be collected from the Reserve Pit)

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

Operator: DEC 21 1994

Chloride content 2400 ppm Fluid volume _____ bbls
Dewatering method used Allow to dry.

Well Name: _____

Comp. Date _____ Old Well No. WICHITA, KS

Location of fluid disposal if hauled offsite: _____

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

Operator Name _____

12-06-94 12-10-94 12-20-94
Spud Date Date Reached TD Completion Date

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 Earl M. Knighton, Jr.
Earl M. Knighton, Jr. President
Date 12/21/94

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C ✓ Wireline Log Received
C ✓ Geologist Report Received
Distribution
✓ KCC _____ SWD/Rep _____ NGPA
KGS _____ Plug _____ Other _____
(Specify)

Subscribed and sworn to before me this 21st day of December.
Notary Public Sarah A. Simon
Sarah A. Simon
Date Commission Expires 12/11/97

Operator Name Knighton Oil Company, Inc. Lease Name Davis Trusts Well # 6

Sec. 6 Twp. 19 Rge. 8 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Admire	494	+899
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Indian Cave	560	+833
		Heebner	1308	+ 85
		Lansing	1600	-207

List All E.Logs Run:
 Dual Induction, Neutron/Density
 Porosity and Sonic Cement Bond Log

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	9-7/8"	7"	20#	150'	Common	70	3% CC
Production	6 1/4"	4 1/2"	9.5#	1678'	Common	155	60/40 Pozmix

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
4 SPF	1601 to 1606	A500
	Set Plug @ 1570'	
4 SPF	418 to 428	

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.	Producing Method	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
		30				

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: _____