FORM MUST BE TYPED

SIDE ONE

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

Operator: License # 31527

Name: Mike Qualizza

Address Rt. 1, Box 127

City/State/Zip Pleasanton, KS 66075

Purchaser:

Operator Contact Person: Same

Phone (913) 352-8363

Contractor: Name: Town Oil Co.

License: 6142

Wellsite Geologist:

RECEIVED
STATE CORPORATION COMMISSION
FEB 25 2000
CONSERVATION DIVISION
Wichita, Kansas

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

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

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

Operator:

Well Name:

Comp. Date ____ Old Total Depth ____

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

1-5-00 Spud Date | 1-10-00 Date Reached TD | 1-10-00 Completion Date

API NO. 15- 107-23592

County Linn

SE - NW - SE - Sec. 11 Twp. 22 Rge. 24 E

1640 Feet from (S)/N (circle one) Line of Section

1820 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 Qualizza Well # 1

Field Name Unk

Producing Formation Bartlesville

Elevation: Ground ____ KB ____

Total Depth 142 PBTD ____

Amount of Surface Pipe Set and Cemented at 20' F

Multiple Stage Cementing Collar Used? ____ Yes ____

If yes, show depth set ____ F

If Alternate II completion, cement circulated from 20

feet depth to surface w/ 3 sx c

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 1500-3000 ppm Fluid volume 80 bl

Dewatering method used

Location of fluid disposal if hauled offsite:

Operator Name Town Oil Co.

Lease Name Cook-Day-Chisam License No.

____ Quarter Sec 15&22 Twp. 19 S Rng. 22 E/

County Linn Docket No. E-13,055

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colora 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 12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of 1 months). One copy of all wireline logs and geologist well report shall be attached with this form. ALL CEMENTING TICKET 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 compli with and the statements herein are complete and correct to the best of my knowledge.

Signature Lisa Town

Title Partner Date 2-23-00

Subscribed and sworn to before me this 23 day of Feb 2000.

Notary Public Donna Jean Barnhart

Date Commission Expires 4-22-2001

DONNA JEAN BARNHART
State of Kansas
My Appt Exp

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)

Form ACO-1 (7-91)

S41937

SIDE TWO

Operator Name Mike Qualizza Lease Name Qualizza Well # 1

Sec. 11 Twp. 22 Rge. 24 [X] 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.) [ ] Yes [X] No

Samples Sent to Geological Survey [ ] Yes [X] No

Cores Taken [ ] Yes [X] No

Electric Log Run (Submit Copy.) [ ] Yes [X] No

List All E.Logs Run:

[ ] Log Formation (Top), Depth and Datums [ ] Sample

Name | Top | Datum

See attached copy of log

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
Surface	9	6¼		20	Portland	3	
Completion	6¼	4½		136	Portland	12	None

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate					
___ Protect Casing					
___ Plug Back TD					
___ 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
	Open hole completion	NOne	

TUBING RECORD Size: None Set At: Packer At: Liner Run [ ] Yes [ ] No: None

Date of First, Resumed Production, SWD or Inj.: N/A Producing Method: N/A [ ] Flowing [ ] Pumping [ ] Gas Lift [ ] Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	N/A	17M	N/A		

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

METHOD OF COMPLETION: [X] Open Hole [ ] Perf. [ ] Dually Comp. [ ] Commingled [ ] (Specify)

Production Interval: 136-14