

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

API NO. 15- 011-22,727-0001

County Bourbon

-SE - SE - SE Sec. 5 Twp. 24 Rge. 22 ^X/_E
W

825 Feet from WN (circle one) Line of Section

165 Feet from EW (circle one) Line of Section

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

Lease Name Scroggs Well # 6

Field Name Unknown

Producing Formation Bartlesville

Elevation: Ground NA KB NA

Total Depth 570' PSTD NA

Amount of Surface Pipe Set and Cemented at 20' Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from TD

feet depth to Surface w/ 83 sx cmt.

Drilling Fluid Management Plan REENTRY JH 3-24-98
(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. _____

Operator: License # 3449

Name: Coen Energy Corporation

Address P.O. Box 412

202 S. State

City/State/Zip Iola, KS 66749

Purchaser: Crude Marketing, Inc.

Operator Contact Person: David Coen

Phone (316) 365-2255

Contractor: Name: COMPANY TOOLS

License: _____

Wellsite Geologist: _____

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

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

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

Operator: Xenia Corporation

Well Name: Scroggs #6

Comp. Date 11/26/90 Old Total Depth 570'

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

11/17/90 11/26/90 2/24/95
Date of F Date Reached TD Completion Date
REENTRY

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.

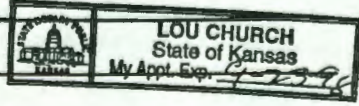
Signature Joe Shyer

Title Production Manager Date 7-14-97

Subscribed and sworn to before me this 14 day of July 1997.

Notary Public Lou Church

Date Commission Expires 9-23-98



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

Operator Name Coen Energy CorporationLease Name ScroggsWell # 6Sec. 5 Twp. 24 Rge. 22 EastCounty Bourbon535972 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests (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 No

Samples Sent to Geological Survey

 Yes No

Cores Taken

 Yes NoElectric Log Run
(Submit Copy.) Yes No

List All E.Logs Run:

 Log

Formation (Top), Depth and Datum

 Sample

Name

Top

Datum

COPY

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 csg.	11"	7"	20#	20'	Portland	5	
Prod. csg.	5 5/8"	2 7/8"	6.5#	559'	Portland	83	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<input checked="" 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	504' to 514'		3780' GALLONS GELLED H ₂ O + 1200 lbs OF 10/20 MESH SAND + 50 lbs 20/40 MESH SAND

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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)		
2/24/95						
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls. Gas-Oil Ratio Grac
	5		NONE			

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

504'-514'