

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

COPY

011-90170-0001

API NO. 15- N/A

County Bourbon

NW . SW . SW . SE Sec. 6 Twp. 24S Rge. 22 ^E

465' Feet from S/W (circle one) Line of Section

2475' 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 Foose Well # 11

Field Name Bronson - Xenia

Injection
Producing Formation Bartlesville

Elevation: Ground N/A KB N/A

Total Depth 710' PBD 702'

Amount of Surface Pipe Set and Cemented at 30' (e) 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 OWWO, 1-21-99 U.C.
(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 # 31652

Operator Name: Norstar Petroleum, Inc.

Address: 5995 Greenwood Plaza Blvd.

Suite 220

City/State/Zip Englewood, CO 80111

Purchaser: Crude Marketing

Operator Contact Person: Per Burchard

Phone (303) 220-1660 XT _____

Contractor Name: N/A

License: ---

Wellsite Geologist: N/A

Signature Type of Completion
--- New Well --- Re-Entry Workover

--- Oil --- SWD --- SLOW --- Temp. Abd.

--- Gas ENHR --- SIGW

--- Dry --- Other (Core, WSW, Expl., Cathodic, etc)

Workover/Reentry: Old Well Info as follows:

Operator: Hillenburg Oil Co

Well Name: Foose # 11

Comp. Date ~ 6/79 Old Total Depth 710'

--- Deepening --- Re-perf. Conv. to Injection

--- Plug Back _____ PBD

--- Commingled _____ Docket No. _____

--- Dual Completion _____ Docket No. _____

--- Other (SWD or Inj?) _____ Docket No. E-19465

~ 6/79 ~ 6/79 ~ 6/79

_____ Date Reached TD _____ Completion Date

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS
RECEIVED
DEC 7 1998
FROM TRANSMISSION

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 2 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.

I certify that the 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: [Signature]

Title: President Date: 12/31/98

Subscribed and sworn to before me this 3RD day of DEC., 1998.

Notary Public: Clark D. Parrott

Notary Commission Expires: My Commission Expires Apr. 5, 1999

UIC HAS COPY ✓

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 type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/>		<input type="checkbox"/> Other (Specify)

CLARK D. PARROTT
NOTARY PUBLIC
STATE OF COLORADO

Operator Name Nobstar Petroleum Inc. Lease Name Foose Well # 11
 sec. 6 Twp. 24S Rge. 22 East West
 County Bourbon

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:
 GR/N LOG 7/13/79

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Name	Top	Datum
Bartlesville	650'	N/A

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	N/A	7 1/2"	N/A	30' (e)	N/A	N/A	N/A
Production	4 3/4"	2"	N/A	~ 702'	Portland A	84	Gel

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

TUBING RECORD

Size _____ Set At _____ Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

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

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____

STATE OF OKLAHOMA
 DEPARTMENT OF REVENUE
 OIL AND GAS DIVISION