

COPY

6-24-22E *did*

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 # 5375
 Name: HILLENBURG OIL COMPANY
 Address: P. O. Box 94
 City/State/Zip: Bronson, Kansas 66716
 Purchaser: KELLY MACLASKEY OILFIELD SERVICES
 Operator Contact Person: Dale Mitchell
 Phone (316) 939-4322

Contractor: Name: COMPANY TOOLS
 License: _____

Wellsite Geologist: NA

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If **OWD**: old well info as follows:
 Operator: _____

Well Name: _____
 Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable

5/5/90 5/10/90 5/15/90
 Spud Date Date Reached TD Completion Date

API NO. 15- 011-22,706
 County Bourbon

SW SW SE Sec. 06 Twp. 24S Rge. 22 XX East West

300 Ft. North from Southeast Corner of Section
2139 Ft. West from Southeast Corner of Section
 (NOTE: Locate well in section plat below.)

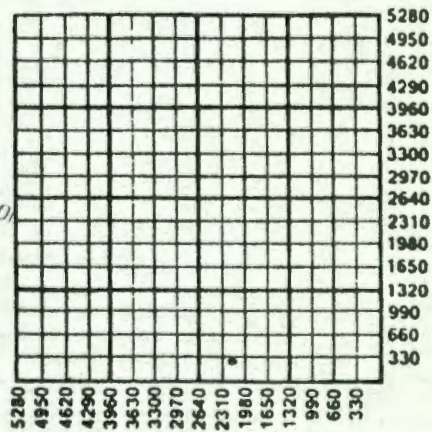
Lease Name FOOSE Well # H-4

Field Name Bronson-Xenia

Producing Formation Bartlesville

Elevation: Ground NA KB

Total Depth 742 PBDT na



Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 0

feet depth to 729 20 w/ 7 114 sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Dale Mitchell

Supervisor of Production Date 7/6/90

Subscribed and sworn to before me this 6th day of July

Dale Mitchell
 Notary Public
 My Commission Expires July 15, 1990



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
 C Wireline Log Received
 C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other
 (Specify) FOOSE

536026

356-45-0

SIDE TWO

Operator Name. HILLENBURG OIL COMPANY Lease Name FOOSE Well # H-4

Sec. 06 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.)

Name	Formation Description	
	Top	Bottom
KANSAS CITY BASE		117
BIG SHALE		270
PAWNEE		402
FORT SCOTT	468	472
BARTLESVILLE	659	672

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	8 5/8"	6 5/8		20'	A-Portland	7	
Production	6"	2 7/8"	6.5#	724	A-Portland	114	2% gel

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	20 shots 671 - 671 661	Water Frac 5 sx 12x30 sand 28 sx 10x20 sand 3 gal AY15	661-671

TUBING RECORD Size 1" Set At _____ Packer At NA Liner Run Yes No

Date of First Production _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	1	NA	NA		26

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

METHOD OF COMPLETION: Open Hole Perforation Dually Completed Commingled Other (Specify) _____

Production Interval _____