

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

COPY

API NO. 15- -011-22854-0001

County Bourbon

E2 E2 NW SW Sec. 07 Twp. 24S Rge. 22E X E  
W

License # 31788

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

Name: Veenker Resources, Inc.

Feet from (E)W (circle one) Line of Section

Address P.O. Box 14339

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

Oklahoma City, OK 73113

Lease Name Medcalf Well # 51

City/State/Zip

Field Name Bronson-Xenia

Purchaser: Plains

Producing Formation Bartlesville

Operator Contact Person: Paul Veenker

Elevation: Ground est 1040 KB same

Phone ( 405 ) 751-1414

Total Depth 723 PBDT 710

Contractor: Name: Xenia Corporation

Amount of Surface Pipe Set and Cemented at 20 Feet

License: 4693

Multiple Stage Cementing Collar Used? Yes X No

Wellsite Geologist: none

If yes, show depth set \_\_\_\_\_ Feet

Designate Type of Completion

If Alternate II completion, cement circulated from 723

\_\_\_\_\_ New Well X Re-Entry \_\_\_\_\_ Workover

feet depth to surface w/ 125 sx cmt.

XX Oil \_\_\_\_\_ SWD \_\_\_\_\_ SLOW \_\_\_\_\_ Temp. Abd.

Drilling Fluid Management Plan NO Drilling Fluid  
(Data must be collected from the Reserve Pit) Re-entry  
4-9-98 U.C.

\_\_\_\_\_ Gas \_\_\_\_\_ ENHR \_\_\_\_\_ SIGN

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

\_\_\_\_\_ Dry \_\_\_\_\_ Other (Core, WSW, Expl., Cathodic, etc)

Dewatering method used \_\_\_\_\_

If Workover:

Operator: Cleaver, Loraine

Location of fluid disposal if hauled offsite:

Well Name: Medcalf 51

Comp. Date \_\_\_\_\_ Old Total Depth 723'

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

\_\_\_\_\_ Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ Conv. to Inj/SWD

\_\_\_\_\_ Plug Back \_\_\_\_\_ PBDT

\_\_\_\_\_ Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_

\_\_\_\_\_ Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_

\_\_\_\_\_ Other (SWD or Inj?) \_\_\_\_\_ Docket No. \_\_\_\_\_

7-24-97

9-4-97

Spud Date

Date Reached TD

Completion Date

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 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 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 Glenn J. Peterman

Title Consultant Date 4-7-98

Subscribed and sworn to before me this 7 day of April, 19 98.

Notary Public Glenn J. Peterman

Commission Expires 01-07-02

GLENNIS J. PETERMAN  
Oklahoma County  
Notary Public in and for  
State of Oklahoma  
Commission expires 01-07-02

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  
IS (Specify)

Operator Name Veenker Resources, Inc. Lease Name Medcalf Well # 51

Sec. 7 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:  
gamma ray/neutron

Log Formation (Top), Depth and Datums  Sample

| Name         | Top  | Datum |
|--------------|------|-------|
| Bartlesville | 648' |       |

| CASING RECORD <input type="checkbox"/> New <input 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   | 6½                | 6                         |                 | 20            | 60/40port      | 5            | 2% gel                     |
| Production  | 5-5/8             | 2-7/8                     |                 | 723           | 60/40 port     | 125          | 2% 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 Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|----------------|--|--|-------|
| 4              | 674-678 perfs  | 400 gal HCL/HF   |       |

| TUBING RECORD                                  |           | Size   | Set At      | Packer At     | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|--|-----------|--|-------------|---------------|---|
| Date of First, Resumed Production, SWD or Inj. |           | Producing Method <input type="checkbox"/> Flowing <input checked="" 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   |
|  | ½         | 0  | 4           | --            | 22  |

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

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled 674

Other (Specify) \_\_\_\_\_ 678