

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

Operator: License # 5602Name: N&B EnterprisesAddress Box 812City/State/Zip Chanute, Kansas 66720Purchaser: N&B Enterprises, Inc.Operator Contact Person: J.R. BurrisPhone (316) 365-3181Fracture Name: J.R. BurrisLicense: 5602Wellsite Geologist: none

Completion Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover☐ Oil ☐ SWD ☐ SIOW ☐ Temp. Abd.☒ Gas ☐ ENHR ☐ SIGW☐ Dry ☐ Other (Core, WSV, 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 Int. SWD☐ Plug Back ☐ PSTD☐ Commingled ☐ Docket No. _____☐ Dual Completion ☐ Docket No. _____☐ Other (SWD or Int?) Docket No. _____Spud Date 1/03/01 Date Reached TD 04/23/01 Completion Date 04/27/01API NO. 15- 001-28907-0000County AllenNW NW - - - - - Sec. 17 Twp. 25 Rge. 19 ☒ E ☐ V4950 Feet from S/W (circle one) Line of Section4620 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name Porter B Well # 1Field Name IolaProducing Formation BartlesvilleElevation: Ground na KB _____Total Depth 915 PSTD _____Amount of Surface Pipe Set and Cemented at 20 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ ex cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Deaerating method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/V

County _____ Docket No. _____

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.

Rules 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 J.R. BurrisTitle co-partner

Date _____

Subscribed and sworn to before me this 30th day of May2001Notary Public Marsha M. BurrisDate Commission Expires 3/28/04

MARSHA M. BURRIS
Notary Public - State of Kansas
My Appt. Expires March 28, 2004

K.C.C. OFFICE USE ONLY

☐ Letter of Confidentiality Attached
☐ Wireline Log Received
☐ Geologist Report Received

Distribution

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

Operator Name N&B EnterprisesLease Name Porter BWell # 1Sec. 17 Twp. 25 Rge. 19☒ EastCounty Allen☐ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests given 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 sheets 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

soil	0	5
lime w/shale	5	257
shale	257	438
shale w/lime	438	633
shale	633	855
sand	855	915TD

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	11 1/2"	8 5/8"	20	20'	Portland	5 none	
production	6 3/4"	4 1/2"	10	860'	50/50 pos	120	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			NA	
<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
	NA	NA	
TUBING RECORD			
Size	Set At na	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SVD or Inj.		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil 0 Bbls. 0	Gas <input checked="" type="checkbox"/> 15 Mcf	Water 0 Bbls. 0 Gas-Oil Ratio 0 Gravity 0

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