

29-26-15E 4

STATE CORPORATION COMMISSION OF KANSAS - OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: license # 9985 name Kansa Oil L.P. address Box 7668

City/State/Zip Shawnee Mission, Ks. 66207

Operator Contact Person Mack V. Colt Phone 913-649-7100

Contractor: license # 5150 name Mack C. Colt, Inc.

Well Geologist None Phone

PURCHASER

Designate Type of Completion [X] New Well [ ] Re-Entry [ ] Workover

- Oil, Gas, Dry, SWD, Inj, Other, Temp Abd, Delayed Comp.

If OWWO: old well info as follows:

Operator, Well Name, Comp. Date, Old Total Depth

WELL HISTORY

Drilling Method: [X] Mud Rotary [ ] Air Rotary [ ] Cable 7-31-85 8-12-85 8-13-85

Total Depth 133 Plugged PBT

Amount of Surface Pipe Set and Cemented at 42 feet

Age Cementing Collar Used? [ ] Yes [ ] No

If Yes, Show Depth Set feet

If alternate 2 completion, cement circulated from feet depth to w/ SX cmt

API NO. 15-207-25,347

County WOODSON

NW NE SE Sec 29 Twp 26 Rge 15 XX East West

2140 Ft North from Southeast Corner of Section 1155 Ft West from Southeast Corner of Section

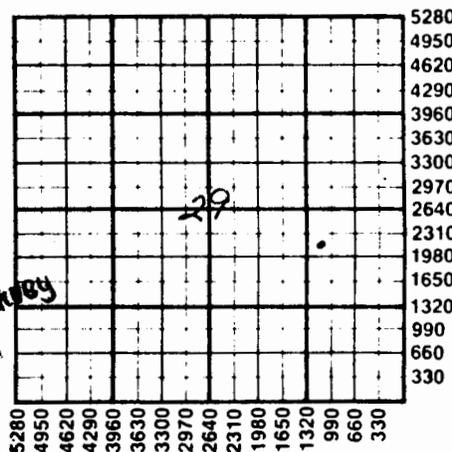
Lease Name West O'Bryan Well# 1A0

Field Name Big Sandy East

Producing Formation DRY

Elevation: Ground 1015 KB

Section Plat



SEP 04 1985 State Geological Survey WICHITA BRANCH

WATER SUPPLY INFORMATION

Source of Water: [ ] Groundwater [ ] Surface Water [ ] Other (explain)

Disposition of Produced Water: [ ] Disposal [ ] Repressuring

Docket #

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission...

Information on side two of this form will be held confidential for a period of 12 months if requested in writing...

A copy of all wireline logs and drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells...

