

COPY

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

Operator: License # 9851
Name: PRYOR OIL CO., INC.
Address: 473 N. SHORE DR.
PARKVILLE. MO.
City/State/Zip: 64151
Purchaser: UNKNOWN
Operator Contact Person: JIM PRYOR
Phone: (816) 587-1225
Contractor: Name: TRI-STAR DRLG.
License: 30551
Wellsite Geologist: JIM PRYOR
Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.
 Gas SMM SLOW
 Dry Other (Core, MW, Expt., Cathodic, etc.)

If Workover/Re-Entry: old well info as follows:

Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
Deepening _____ Re-perf. _____ Conv. to Inj/SWD _____
Plug Back _____ PSTD _____
Cemented _____ Bucket No. _____
Dual Completion _____ Bucket No. _____
Other (SWD or Inj) _____ Bucket No. _____
10-26-93 11-8-93 11-15-93
Spud Date Date Reached TD Completion Date

API NO. 15- 015-23372
County BUTLER
C - NW - NW Sec. 26 Twp. 28 Rge. 3e
660 Foot N (circle one) of Section Line
660 Foot N (circle one) of Section Line
Footage Calculated from Nearest Outside Section Corner:
NE, SE, SW or NW (circle one)
Lease Name RICHARDS Well # 1-93
Field Name SALTER
Producing Formation SIMPSON
Elevation: Ground 1326 EG _____
Total Depth 3001' PSTD _____
Amount of Surface Pipe Set and Cemented at 201' 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/ _____ on amt.

Drilling Fluid Management Plan ALT 1 7-11-95
(Data must be collected from the Reserve File)
Chloride content 20,000 ppm Fluid volume 200 bbls
Desulfuring method used EVAPORATION
Disposition of fluid disposal if hauled offsite:
Operator Name _____
Lease Name _____ License No. _____
Quarter Sec. _____ Twp. _____ Rge. _____ S/W
County _____ Section No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 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 _____
Title PRESIDENT Date 2-2-94
Subscribed and sworn to before me this 2nd day of FEB
19 94.

Notary Public _____
LEONARD L. HOPKINS
Notary Public - Notary Seal
STATE OF MISSOURI
Platte County
My Commission Expires: Dec. 6, 1996

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received
Distribution
 KCC SWD/Rep NCPA
 KGS Plug Other (Specify)

COPY

26 28 3
 East
 West

County BUTLER

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time test 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.

<p>Drill Stem Tests Taken (Attach Additional Sheets.)</p> <p>Samples Sent to Geological Survey</p> <p>Cores Taken</p> <p>Electric Log Run (Submit Copy.)</p> <p>List All E. Log Run:</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p><input type="checkbox"/> Log Formation (Top), Depth and Bottom</p> <p style="text-align: center;">Name Top Bottom</p> <p>BASE K C 2511 -1185</p> <p>TOP CHEROKEE 2674 -1348</p> <p>TOP KINDERHOOK 2915 -1589</p> <p>TOP SIMPSON 2980 -1654</p>	<p><input checked="" type="checkbox"/> Sample</p>
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CASING RECORD <input checked="" 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 Additive
SURFACE	12 1/2"	8 5/8"	26#	201'	PORTLAND	200	2%cc
PRODUCTION	7 7/8"	5 1/2"	17#	2980	PORTLAND	110	60-40 poz

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
Perforate					
Protect Casing					
Plug Back TD					
Plug Off Zone					

Shots Per Foot	PERFORATION RECORD - Bridge Plug Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Passage of Each Interval Perforated		(Amount and Kind of Material Used)	
	OPEN HOLE TO 3001'		natural	

TUBING RECORD Size 2 7/8 Set At 2977 Packer At 2980 Liner Run Yes No

Date of First, Documented Production, G&D or Inj. 11-24-93 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 2 Bbls. Gas -0- Mcf Water 58 Bbls. Gas-Oil Ratio Gravity 29

Disposition of Gas: Vented Sold Used on Lease (if vented, submit AGU-10.)

METHOD OF COMPLETION: Open Hole Perf. Dual (Specify) Seamed Other (Specify)

Production Interval: _____