

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

Operator: License # 3830

Name: AX&P, Inc.

Address P.O. Box 1176

City/State/Zip Independence, Ks 67301

Purchaser: _____

Operator Contact Person: JJ Hanke

Phone () 620 3310144

Contractor: Name: DWayne Erbe

License: 32690

Wellsite Geologist: JJ Hanke

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD S1OW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

Workover/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

9/10/01 9/22/01 9/22/01
Spud Date Date Reached TD Completion Date

API NO. 15- 205-25443-0000

County Wilson

-SW NE Sec. 28 Tmp. 30 Rge. 16 E
W

3333 Feet from S/N (circle one) Line of Section

2600 Feet from E/W (circle one) Line of Section

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

Lease Name Unit 1-Keys Heirs Well # KH#17

Field Name Neodesha

Producing Formation Bartlesville

Elevation: Ground 600' KB _____

Total Depth 840' PBTB _____

Amount of Surface Pipe Set and Cemented at 34' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 835'

feet depth to surface w/ 90 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Tmp. _____ S Rng. _____ E/W

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.

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 [Signature]
Title PREL Date 11/28/01

Subscribed and sworn to before me this 28th day of NOV, 2001.

Notary Public [Signature]
My Commission Expires 12-26-2003

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
(Specify)

NOTARY PUBLIC
STATE OF KANSAS
PATSY C. STIPP
My Appt. Exp. 12-26-2003

Operator Name AX&P, Inc.
 . 28 Twp. 30 Rge. 30
 East
 West

Lease Name Unit 1 - Keys Heir Well # KH#17
 County Wilson

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
 Core Samples Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 Submit All E.Logs Run:

Log Formation (Top), Depth and Datums	Sample Datum
(see Driller's Log attached,)	
Oswego 495'	
Mulkie 605'	
Summit 625'	
Oil Sand 773'	

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
6 1/4							
Production	5 1/4	2 7/8	6.8	835'	PozMix	90	salt
Surface	12"	8"	22	34'	Portland	14	

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
	not yet perforated		

CASING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

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

Position of Gas: METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled _____
 Vented Sold Used on Lease (If vented, submit ACO-18.) Other (Specify) _____