

COPY

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

7084

API NO. 15- 019-22,043 0002

County CHAUTAQUA

SE - SE - SE Sec. 19 Twp. 33 Rge. 13 XX E W

347 Feet from S (circle one) Line of Section

281 Feet from E (circle one) Line of Section

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

Lease Name BALLARD Well # D-3

Field Name FRASIER

Producing Formation MULKY COAL

Elevation: Ground 891 KB NA

Total Depth 1655 PBTD 1520

Amount of Surface Pipe Set and Cemented at 100 Feet

Multiple Stage Cementing Collar Used? Yes XX No

If yes, show depth set NA Feet

If Alternate II completion, cement circulated from NA-1639

feet depth to NA SURFACE w/ NA 139 sx cmt.

Drilling Fluid Management Plan ohw 11-19-92
(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. Twp. S Rng. E/W

County _____ Docket No. _____

Operator: License # 3234

Name: URANUS, INC.

Address 800 WEST 47TH STREET,

SUITE 318

City/State/Zip KANSAS CITY, MO 64112

Purchaser: PERU-HALE PIPELINE SYSTEM

Operator Contact Person: MITCHELL HERL

Phone (816) 531-0202

Contractor: Name: OSAGE DRILLING INC.

License: NA

Onsite Geologist: NA

Designate Type of Completion
XX New Well XX Re-Entry XX Workover

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

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

Operator: OSAGE DRILLING INC.

Well Name: D-3

Comp. Date 10-30-80 Old Total Depth 1655

XX Deepening XX Re-perf. 1520 Conv. to Inj/SWD
1520 Plug Back PBTD
XX Commingled Docket No. _____
XX Dual Completion Docket No. _____
XX Other (SWD or Inj?) Docket No. _____

10-24-80 10-30-80 6-20-92
Spud Date Date Reached TD Completion Date

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 [Signature]

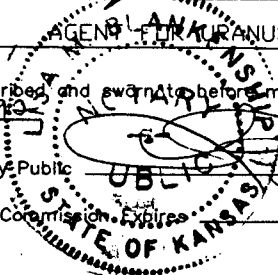
Title AGENT FOR URANUS, INC. Date 11-16-92

Subscribed and sworn to before me this 16 day of Nov.

Notary Public [Signature]

Date Commission Expires 4-16-94

K.C.C. OFFICE USE ONLY
F XX Letter of Confidentiality Attached
C XX Wireline Log Received
C XX Geologist Report Received
Distribution
XX KCC XX SWD/Rep XX NGPA
XX KGS XX Plug XX Other (Specify)
RECEIVED
NOV 19 1992



Operator Name URANUS, INC. Lease Name BALLARD Well # D-3

Sec. 19 Twp. 33S Rge. 13 East West
 County CHAUTAUQUA

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 (Attach Additional sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	MULKY COAL	1268	-377
List All E. Logs Run:				

SEE PREVIOUS LOGS SUBMITTED WITH ORIGINAL ACO-1

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							NA

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
— Perforate				
— Protect Casing	182-152	BULK CEMENT	10	GILSONITE
— Plug Back TD				
<input checked="" type="checkbox"/> Plug Off Zone	616-620	BULK CEMENT	10	GILSONITE
	1010-1024	BULK CEMENT	10	GILSONITE

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
2	1268-1274 3 1/8 DML HSC	15000# 2-X40 SAND	1268-1274
		100 GAL 15% HCL ,50# CITRIC,305 BBLs	CITY WATER

TUBING RECORD	Size 2"	Set At 1168	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 7-20-92	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 0	Bbls.	Gas 30	Mcf Water 10
				Gas-Oil Ratio 100:0
				Gravity

Disposition of Gas: <input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	Production Interval 1268-1274
(If Vented, submit ACO-18.)	<input type="checkbox"/> Other (Specify) _____	