

SIDE TWO

Operator Name JAS Oil Co., Inc.Lease Name Sam Miller Well # 1Sec. 24 Twp. 33 Rge. 5 East WestCounty Cowley

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.) 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
Layton	2281	2389
Kansas City	2470	2606
Mississippi	3052	3115

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	12 $\frac{1}{4}$	8 5/8	24	202	bulk	110	310 lb c.c.
Production		4 $\frac{1}{2}$	10	3115	bulk	100	10 sx. lite
							100 sx. poxmix

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing	3056-62	bulk	100	188 lb. cal.cl.
Plug Back TD	" "	"	"	" " " "
<input checked="" type="checkbox"/> Plug Off Zone	2234-35	"	150	
	2297-2302	"	100	

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
1	3056-3065	750 gal. mud acid 2000 " 15% NE acid	3056-3065 " "
1	3060-3068		
1	2334-2335 Arrow packer at 2350	150 sx. common cement	
1	2297-2302	350 gal. 15% mud acid	50sx. common cement
1	2308-2313	300 gal. 15% mud acid	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	none				

Date of First, Resumed Production, SWD or Inj.	Producing Method	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
none	none	

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	none				

Disposition of Gas:

 Vented Sold Used on Lease
(If vented, submit ACO-18.)

METHOD OF COMPLETION

<input type="checkbox"/> Open Hole	<input type="checkbox"/> Perf.	<input type="checkbox"/> Dually Comp.	<input type="checkbox"/> Commingled	Production Interval
<input type="checkbox"/> Other (Specify) _____				