

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

API NO. 15-125-27,027

County MONTGOMERY

DESCRIPTION OF WELL AND LEASE



Operator: license # 6007
name BLACK STAR PETROLEUM CORP.
address P. O. BOX 356
City/State/Zip COFFEYVILLE, KANSAS 67337

Operator Contact Person RICK WEISS
Phone 316-251-6872

Driller: license # 6007
name BLACK STAR PETROLEUM CORP.

Geologist STEVE OVENS
Phone 316-251-3952

Signature Type of Completion
 New Well Re-Entry Workover

Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

OWWO: old well info as follows:

Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method: Mud Rotary Air Rotary Cable
5-6-84 8-7-86 11-20-84
Start Date Date Reached TD Completion Date

662' 20'
Depth PBTD Amount of Surface Pipe Set and Cemented at feet
Multiple Stage Cementing Collar Used? Yes No

If Yes, Show Depth Set feet

Alternate 2 completion, cement circulated
m feet depth to w/ SX cmt

NE. Sec 30 Twp 34 Rge 17
2970 Ft North from Southeast Corner of Section
990 Ft West from Southeast Corner of Section
(Note: locate well in section plat below)

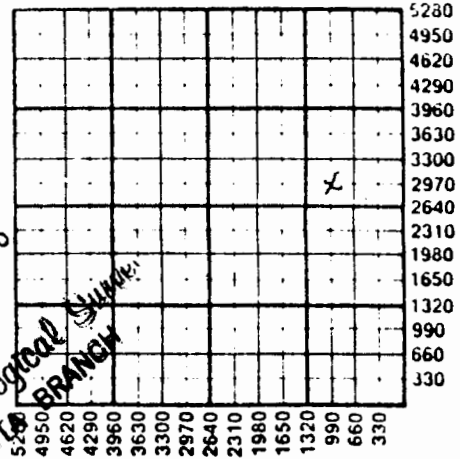
Lease Name VAUGHN H Well# 19

Field Name COFFEYVILLE-CHERRYVALE

Producing Formation REDFORK

Elevation: Ground NA KB

Section Plat



WATER SUPPLY INFORMATION

Source of Water:
Division of Water Resources Permit #
 Groundwater Ft North From Southeast Corner and
(Well) Ft. West From Southeast Corner of
Sec Twp Rge East West
 Surface Water Ft North From Southeast Corner and
(Stream, Pond etc.) Ft West From Southeast Corner
Sec Twp Rge East West
 Other (explain)
(purchased from city, R.W.D.#)

Disposition of Produced Water: Disposal Repressuring

Docket #

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rules 82-3-130 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.

Operator Name **BLACK STAR PETROLEUM** Lease Name **VAUGHN H** Well# **19 SEC. 30 TWP. 34 RGE. 17**

WELL LOG

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests, flowing 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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
OSWEGO #1	371	399
OSWEGO #2	402	417
OSWEGO #3	441	449
REDFORK	596	609

TUBING RECORD size _____ set at _____ packer at _____ Liner Run Yes No

Date of First Production 11-23-84	Producing method <input type="checkbox"/> flowing <input checked="" type="checkbox"/> pumping <input type="checkbox"/> gas lift Other (explain) _____				
Estimated Production Per 24 Hours	Oil 2	Gas Trace	Water 80%	Gas-Oil Ratio	Gravity 32
	Bbls	MCF	Bbls	CFPB	

METHOD OF COMPLETION

Disposition of gas: vented sold used on lease
 open hole perforation other (specify) _____
 Dually Completed Commingled

PRODUCTION INTERVAL
596-609

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
SURF. CSG.	10	7	17#	41'	Portland	15	3%CaCL2
PROD. CSG.	6 1/4	2 7/8	6.4	645	50/50POZ	114	10%NaCL2

PERFORATION RECORD

shots per foot _____ specify footage of each interval perforated
 2 13 holes

Acid, Fracture, Shot, Cement Squeeze Record
 (amount and kind of material used)

7500# Sand 596-609