

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

Operator: License # 30084

Name: Stroud Oil Properties, Inc.

Address 200 E. First, Suite 100

City/State/Zip Wichita, Kansas 67202

Purchaser: _____

Operator Contact Person: George R. Jones

Phone (316, 262-5503)

Contractor: Name: B.R. Walker

License: 9341

Wellsite Geologist: W.T. Stoeckinger

Designate Type of Completion

New Well Re-Entry Workover

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

*coal seam gas
OAWO: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

10/24/90 10/25/90 12/4/90

Spud Date Date Reached TD Completion Date

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on side two of this form will be held confidentially 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 President Date 1/21/91

Subscribed and sworn to before me this 21 day of January, 1991.

ary Public [Signature]

Date Commission Expires 9-5-94

KAREN E. HOUSEBERG
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 9-5-94

SIDE ONE

API NO. 15- 099-22,863
County Labette
C NE NE Sec. 19 Twp. 34 Rge. 18 East West

4620 Ft. North from Southeast Corner of Section
660 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

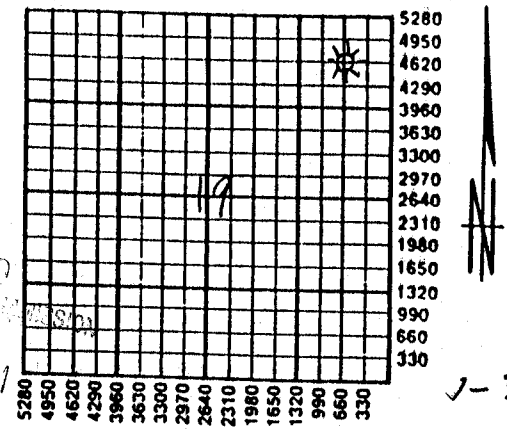
Lease Name Gaier Well # 2

Field Name Valeda

Producing Formation Weir Coal

Elevation: Ground 765 KB _____

Total Depth 855' PBDT _____



Amount of Surface Pipe Set and Cemented at 23 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 855

feet depth to surface w/ 152 sx cmt.

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received

Distribution
 KCC Stb/Rep NGPA
 KGS Plug Other (Specify) I

Operator Name Stroud Oil Properties, Inc. Lease Name Gaier Well # 2
 Sec. 19 Twp. 34 Rge. 18 East West
 County Labette

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy.)	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Fort Scott</td> <td style="text-align: center;">235'</td> <td></td> </tr> <tr> <td>Mulky Coal</td> <td style="text-align: center;">320'</td> <td></td> </tr> <tr> <td>Weir Coal</td> <td style="text-align: center;">562'</td> <td></td> </tr> <tr> <td>Mississippi</td> <td style="text-align: center;">815'</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Fort Scott	235'		Mulky Coal	320'		Weir Coal	562'		Mississippi	815'	
Name	Top	Bottom														
Fort Scott	235'															
Mulky Coal	320'															
Weir Coal	562'															
Mississippi	815'															

CASING RECORD <input type="checkbox"/> New <input checked="" 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
Production	8-3/4"	7"		23	Portland	2sx	
Surface	6-1/2"	4-1/2"		855	PortlandA	152sx	5% salt, 5% gilsonite
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			
8/ft	557-562'			Fracture (Stress)			557-62'
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size		Set At		Packer At			
2-7/8		854'					
Date of First Production		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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

open hole Perforation Usually Completed Commingled other (Specify) _____

Production Interval _____