

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM**

**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 4872  
Name: SRAM OIL, INC.  
Address: 15403 161st Road  
City/State/Zip: Winfield, KS 67156  
Purchaser: --  
Operator Contact Person: Toby Elster  
Phone: (316) 263-0542  
Contractor: Name: J & M Dixon Drilling  
License: 3736  
Wellsite Geologist: Toby Elster

Designate Type of Completion:

New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ Conv. to Enhr./SWD  
Plug Back \_\_\_\_\_ Plug Back Total Depth \_\_\_\_\_  
Commingled Docket No. \_\_\_\_\_  
Dual Completion Docket No. \_\_\_\_\_  
Other (SWD or Enhr.?) Docket No. \_\_\_\_\_

8-20-03 9-3-03 9-29-03  
Spud Date or Date Reached TD Completion Date or Recompletion Date

**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. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of 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.

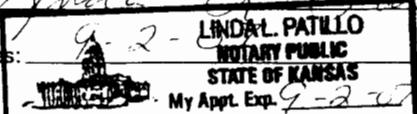
Signature: Toby Elster  
Title: Agent Date: Oct 1, 2003

Subscribed and sworn to before me this 1st day of October,

19 2003

Notary Public: Linda L. Patillo

Date Commission Expires: 9-2-07



API No. 15 - 035 24180 00 00

County: Cowley

123 E CSE SW Sec. 34 Twp. 34 S. R. 3  East  West

660' feet from S / E (circle one) Line of Section

3133 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE: NW SW

Lease Name: Tauscher B Well #: B-1

Field Name: Brandenburg

Producing Formation: Douglas Sand

Elevation: Ground: 1155 Kelly Bushing: 1161

Total Depth: 3445 Plug Back Total Depth: 2104

Amount of Surface Pipe Set and Cemented at 306 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from \_\_\_\_\_

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

*Oct 1, 2003*

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used \_\_\_\_\_ RECEIVED

Location of fluid disposal if hauled offsite: KANSAS CORPORATION COMMISSION

Operator Name: OCT 01 2003

Lease Name: \_\_\_\_\_ License Number: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R.  East  West

County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

*RECEIVED*

*OCT 01 2003*

<p>KCC Office Use ONLY</p> <p><input checked="" type="checkbox"/> Letter of Confidentiality Attached If Denied, Yes <input type="checkbox"/> Date: _____</p> <p><input checked="" type="checkbox"/> Wireline Log Received</p> <p><input checked="" type="checkbox"/> Geologist Report Received</p> <p>UIC Distribution</p>	
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Operator Name: SRAIL OIL, INC. Lease Name: Tauscher B Well #: B-1  
 Sec. 34 Twp. 34 S. R. 3  East  West County: Cowley

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <i>(Attach Additional Sheets)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Topeka	1488 (- 327)
Electric Log Run <i>(Submit Copy)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Elgin Sand	1753 (- 592)
List All E. Logs Run: Log-Tech Digital Log: DIL and DCPL Surveys		Heebner Shale	1853 (- 697)
Bartlesville	3331 (-2170)	Douglas Sand - Upper	1912 (- 751)
Conglomerate	3337 (-2226)	" " - Lower	2032 (- 871)
Mississippian Chert	3435 (-2274)	Stalnaker	2200 (-1039)
RTD	3345 (-2284)	Layton	2647 (-1486)
		Kansas City	2300 (-1633)
		B/Kansas City	2965 (-1804)
		Marmaton	3048 (-1887)

CASING RECORD <input checked="" 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	# Sacjs Used	Type and Percent Additives
Production	7 7/8	4 1/2"	9.5#	2206	40-60	100	2% Gel

## ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:  — Perforate — Protect Casing — Plug Back TD — Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives

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	10s/1912-23		as
2	15s/2030-38	750 gals 15% HCL acid w/FE soap	shown

TUBING RECORD	Size 2"	Set At 2040'	Packer At None	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. D & A	Producing Method	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas METHOD OF COMPLETION Production Interval

Vented  Sold  Used on Lease  
*(If vented, sumit ACO-18.)*  Open Hole  Perf.  Dually Comp.  Commingled  
 Other (Specify) \_\_\_\_\_