

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

COPIED
1-853-2E

Operator: License # 31755

Name: Shallow Gas Exploration

Address box 55384

City/State/Zip Tulsa, Oklahoma 74155

Purchaser: Three Brothers Energy

Operator Contact Person: Mark Ganer

Phone (918) 664-5287

Contractor: Name: McPherson

License: 5675

Wellsite Geologist: none

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

12-18-95 12-19-95 12-28-95
Spud Date Date Reached TD Completion Date

API NO. 15- 191-222630000

County Sumner

C - SE - SW - NW Sec. 1 Twp. 35S Rge. 2 E W

2310 Feet from S (circle one) Line of Section

990 Feet from E (circle one) Line of Section

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

Lease Name Horton 1-A Well # 1-A

Field Name Hilltop

Producing Formation Neva

Elevation: Ground 1215 KB 1219

Total Depth 900 PBTD _____

Amount of Surface Pipe Set and Cemented at 140 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 ALT 1 JFH 5-14-96
(Data must be collected from the Reserve Pit) N/A

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. _____

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APR 25 A 10:11

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 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 Mark Ganer

Title Operator Date 3-29-96

Subscribed and sworn to before me this 22 day of APRIL, 19 96.

Notary Public Kathy Schroeder

Commission Expires 5-24-99

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

Operator Name Shallow Gas Exploration Lease Name Horton Well # 1-A
 Sec. 1 Twp. 35S Rge. 2 East County Sumner
 West

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 Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 List All E.Logs Run:
 Gamma-Neutron

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 soil 0-8
 shale-lime 8-804
 Neva (gas) 804-830
 shale 830-900 TD

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
Surface	9 3/4	7"	28	144'	reg	60	n/a
Long string	5 1/4	2 7/8	4	851	reg-pos	80	n/a

ADDITIONAL CEMENTING/SQUEEZE RECORD <u>N/A</u>				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

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	808-818	200 gal 15% HCL	<u>808-818</u>

TUBING RECORD		Size <u>N/A</u>	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. Feb 1996		Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours 600 mcf	Oil Bbls. none	Gas Mcf 600	Water Bbls. trace	Gas-Oil Ratio	Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)
 METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____
 Production Interval _____