

COPY

SIDE ONE

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

Operator: License # 5042  
Name: Edmiston Oil Co., Inc.  
Address 125 N. Market, Suite 1260  
City/State/Zip Wichita, KS 67202-1774  
Purchaser: Texaco Trading and Transportation  
Operator Contact Person: Jon M. Callen  
Phone ( 316 ) 265-5241

Contractor: Name: McGown Drilling Company  
License: 5786

Wellsite Geologist: Max R. Lovely

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  S.W.D.  Temp. Abd.  
 Gas  Inj  Delayed Comp.  
 Dry  Other (Core, Water Supply, etc.)

If O.W.D.: old well info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Drilling Method:  
 Mud Rotary  Air Rotary  Cable  
9/20/90 9/25/90 10/19/90  
Spud Date Date Reached TD Completion Date

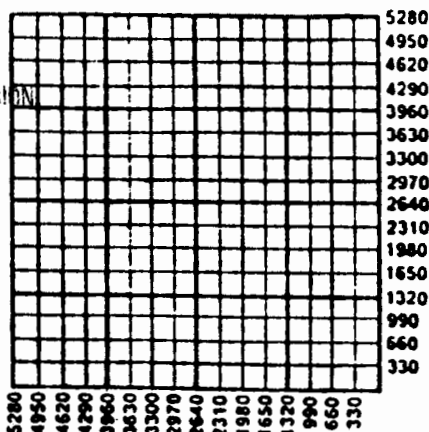
API NO. 15- 103-21,203  
County Leavenworth  
NE SE NW Sec. 20 Twp. 8S Rge. 21  East  
West  
3630 Ft. North from Southeast Corner of Section  
2970 Ft. West from Southeast Corner of Section  
(NOTE: Locate well in section plat below.)

Lease Name Haigwood Well # 3  
Field Name Easton

Producing Formation Cherokee

Elevation: Ground 1042 KB \_\_\_\_\_

Total Depth 1435 PBD 1407



Amount of Surface Pipe Set and Cemented at 41 Feet

Multiple Stage Cementing Collar Used?  Yes  No

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

If Alternate II completion, cement circulated from 1434

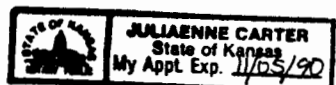
feet depth to surface w/ 160 sx cmt.

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 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 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 Jon M. Callen  
Title President Date 10/22/90  
Subscribed and sworn to before me this 22nd day of October,  
19 90.  
Notary Public Julienne Carter  
Date Commission Expires November 5, 1990

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Drillers Timelog Received  
Distribution  
 KCC  S.W.D./Rep  NSPA  
 KGS  Plug  Other  
(Specify)  
JOG/SOC



**SIDE TWO**

Operator Name Edmiston Oil Co., Inc. Lease Name Haigwood Well # 3  
 Sec. 20 Twp. 8S Rge. 21  East  West  
 County Leavenworth

**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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 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 (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">Formation Description</th> </tr> <tr> <td></td> <td style="text-align: center;"><input checked="" type="checkbox"/> Log</td> <td style="text-align: center;"><input type="checkbox"/> Sample</td> </tr> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> <tr> <td>Base Kansas City</td> <td></td> <td>665+377</td> </tr> <tr> <td>Cherokee Shale</td> <td>902+140</td> <td></td> </tr> <tr> <td>McLouth Sand</td> <td>1375-333</td> <td></td> </tr> <tr> <td>Mississippian</td> <td>1420-378</td> <td></td> </tr> <tr> <td>LTD</td> <td>1434-392</td> <td></td> </tr> <tr> <td>RTD</td> <td>1435-393</td> <td></td> </tr> </table>	Formation Description				<input checked="" type="checkbox"/> Log	<input type="checkbox"/> Sample	Name	Top	Bottom	Base Kansas City		665+377	Cherokee Shale	902+140		McLouth Sand	1375-333		Mississippian	1420-378		LTD	1434-392		RTD	1435-393	
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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		8-5/8		41		40	
Production	6 1/2	4 1/2		1434		160	
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated						Depth
4	1376 - 1390			Frac: 1000# 20/30			1376-90
				4000# 10/20			"
				1000# 8/12			"
				150 bbls gel water			"
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	Size	Set At	Packer At				
	2-3/8	1376'					
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)					
10/19/90							
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio		Gravity	
	25		2				

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

**METHOD OF COMPLETION**

Open Hole  Perforation  Dually Completed  Commingled

Other (Specify) \_\_\_\_\_

Production Interval \_\_\_\_\_