

COPY
607
SIDE ONE

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

API NO. 15- 141-20,265

County Osborne

SE SW NE Sec. 30 Twp. 10 Rge. 11 East West

2970 Ft. North from Southeast Corner of Section

1650 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plot below.)

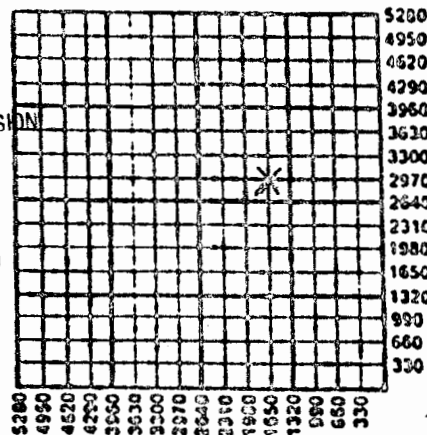
Lease Name Taylor "A" Well # 1

Field Name Wildcat

Producing Formation None

Elevation: Ground 1658 KB 1663

Total Depth 2985 PBTD None



A 17-D DKO

Amount of Surface Pipe Set and Cemented at 218 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/ _____ grt. cmt.

Operator: License # 5184

Name: Shields Oil Producers, Inc.

Address Shields Bldg.

City/State/Zip Russell, KS 67665

Purchaser: None

Operator Contact Person: M. T. Ratts

Phone (913) 483-3141

Contractor: Name: Shields Drlg., Co., Inc.

License: 5655

Wellsite Geologist: Francis Whisler

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd. Comp.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If CMO: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Methods:

Mud Rotary Air Rotary Cable

7-30-91 8-4-91 8-4-91

Spud Date Date Reached TD Completion Date

RECEIVED
STATE CORPORATION COMMISSION
SEP 04 1991
DIVISION
Wichita, Kansas

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.

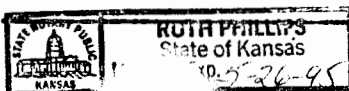
Signature M. T. Ratts

Title Production Supt Date 8-8-91

Subscribed and sworn to before me this 8th day of August

91
Notary Public Ruth Phillips

Date Commission Expires _____



K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Drillers Time Log Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input type="checkbox"/> NGPA
		<input checked="" type="checkbox"/> Other
(Specify)		

69913

SIDE TUB

Operator Name Shields Oil Producers, Inc. Lease Name Taylor "A" Well # 1
 Sec. 30 Twp. 10 Rge. 11 East West
 County Osborne

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation Description <input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>675</td> <td>707</td> </tr> <tr> <td>Topeka Lm</td> <td>2610</td> <td>2852</td> </tr> <tr> <td>Heebner Sh</td> <td>2852</td> <td>2856</td> </tr> <tr> <td>Toronto Lm</td> <td>2876</td> <td>2896</td> </tr> </tbody> </table>	Name	Top	Bottom	Anhydrite	675	707	Topeka Lm	2610	2852	Heebner Sh	2852	2856	Toronto Lm	2876	2896
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Anhydrite	675	707														
Topeka Lm	2610	2852														
Heebner Sh	2852	2856														
Toronto Lm	2876	2896														

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	# Sacks Used	Type and Percent Additives
Surface	12 1/4	8 5/8	20	218	quickset	145	
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used) Depth			
TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input 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-19.)

METHOD OF COMPLETION: Open Hole Perforation Dually Completed Commingled Other (Specify) _____

Production Interval: _____