

SAC

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 # 5537

Name: Kenny Brown Enterprises

Address 401 N. Washington, P.O. Drawer

City/State/Zip Plainville, KS 67663

Purchaser:

Operator Contact Person: Kenny Brown

Phone (913) -434-7236

Contractor: Name: Emphasis Oil Operations

License: 8241

RECEIVED
STATE CORPORATION COMMISSION

Wellsite Geologist: Ron Nelson

Designate Type of Completion

New Well Re-Entry Workover
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If O&M: old well info as follows:

Operator:

Well Name:

Comp. Date Old Total Depth

Filling Method:

 Mud Rotary Air Rotary Cable

3/26/90 9/2/90 9-7-90
Spd Date Date Reached TD Completion Date

API NO. 15- 163-23,018-A

County Rocks

SE SW SE sec. 8 twp. 10S Rge. 16 X West

330 Ft. North from Southeast Corner of Section

1650 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

340

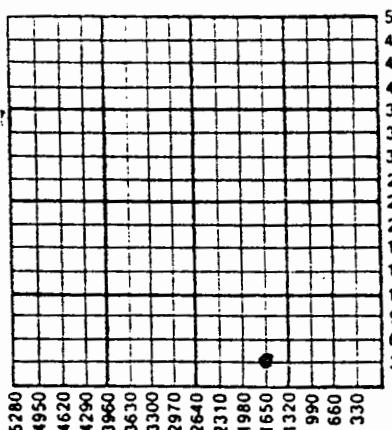
Lease Name K. Brown SWD Well # 5

Field Name Ranger

Producing Formation none

Elevation: Ground 1930' KB 1935'

Total Depth 3700' PBDT none



Air II ALV.

NOV 8 1991

Previously set
Amount of Surface Pipe Set and Cemented at 269 FeetMultiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 3700'

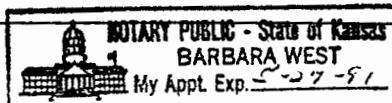
feet depth to Surface w/ 500 sx cmt.

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 Kenny P. BrownTitle Owner-Operator Date 9-12-90Subscribed and sworn to before me this 13th day of September, 90.Notary Public Barbara West

Date Commission Expires



K.C.C. OFFICE USE ONLY
 F Letter of Confidentiality Attached
 C Wireline Log Received
 C Drillers Timelog Received

Distribution

<input checked="" type="checkbox"/> KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/> KGS	<input type="checkbox"/> Plug
<input checked="" type="checkbox"/> NGPA	
<input checked="" type="checkbox"/> Other (Specify)	

70965

SIDE TWO

Operator Name Kenny Brown Enterprises Lease Name K. Brown SWD Well # 5
 East County Rooks
 Sec. 2 Twp. LCS Rge. 16 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation Description		
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	<input checked="" type="checkbox"/> Sample	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Bottom
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Anhydrite	1118'	= 818'
		Base Anhydrite	1151'	= 784'
		Topeka	2827'	= 892'
		Heebnor	5060'	= 1125'
		Toronto	3081'	= 1146'
		IMC	3103'	= 1168'
		EKC	3352'	= 1422'
		Arbuckle	3462'	= 1527'
		T.D.	3700'	= 1771'

CASING RECORD							
<input 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-Driv	set	8 5/8"	24 ¹¹ / ₁₆	269'	60/40	175	2% gel 3% CO
Production		5 1/2"		3516'	50/50 nos Econo-Lite	150 350	2% gel, 10% salt 1/4# flocei per SPB
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated						Depth
TUBING RECORD				Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	Size	Set At	Packer At				
	2 7/8"	3449'	3451'				

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:	METHOD OF COMPLETION			Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole	<input type="checkbox"/> Perforation	<input type="checkbox"/> Dually Completed	<input type="checkbox"/> Commingled
	<input type="checkbox"/> Other (Specify)			