

1-108-22 W

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

Operator: License # 5652Name: Mustang Oil & Gas CorporationAddress 100 S. Main, Suite 300city/State/Zip Wichita, KS 67202Purchaser: N/AOperator Contact Person: Randall W. KoudelePhone (316) 267-8011

Contractor: Name: \_\_\_\_\_

License: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

## Designate Type of Completion

 New Well  Re-Entry  Workover

<input type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> SLOW	<input type="checkbox"/> Temp. Abd.
<input type="checkbox"/> Gas	<input checked="" type="checkbox"/> ENHR	<input type="checkbox"/> SIGW	
<input type="checkbox"/> Dry		<input type="checkbox"/> Other (Core, WSW, Expl., Cathodic, etc)	

If Workover/Re-Entry: old well info as follows:

Operator: Mustang Oil & Gas CorporationWell Name: Brown #2Comp. Date 1-17-77 Old Total Depth 3950'

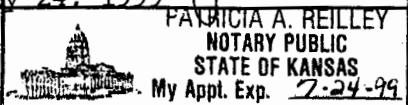
<input checked="" type="checkbox"/> Deepening <u>XXX</u>	<input type="checkbox"/> Re-perf. <u>X</u>	<input type="checkbox"/> Conv. to <u>Ind/SWD</u>
<input type="checkbox"/> Plug Back		<input type="checkbox"/> PBT
<input type="checkbox"/> Comingled	<input type="checkbox"/> Docket No. _____	
<input type="checkbox"/> Dual Completion	<input type="checkbox"/> Docket No. _____	
<input checked="" type="checkbox"/> Other (SWD or <u>Ind</u> )	<input type="checkbox"/> Docket No. <u>E-27,223</u>	

3-13-96 3-15-96 3-16-96

<input type="checkbox"/> Date of Start	<input type="checkbox"/> Date Reached TD	<input type="checkbox"/> Completion Date of WORKOVER
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**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Randall W. Koudele Randall W. KoudeleTitle Sr. Staff Reservoir Engineer Date 5-16-96Subscribed and sworn to before me this 16th day of May, 1996.Notary Public Patricia ReileyDate Commission Expires July 24, 1999

SIDE ONE

API NO. 15- 065-208800061

COPY

County Graham90'W of C NE- Sec. 1 Twp. 10S Rge. 22 X E3960 Feet from S/N (circle one) Line of Section1410 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:  
NE. SW, NW or SW (circle one)Lease Name Brown Well # 2Field Name BrassfieldREPRESSURED Formation Lansing/Kansas CityElevation: Ground 2332' KB 2340'Total Depth 3952' PBT \_\_\_\_\_Amount of Surface Pipe Set and Cemented at 8-5/8" @260' FeetMultiple Stage Cementing Collar Used? X Yes        NoIf yes, show depth set 1844' w/ 420 sxs to surface feetIf Alternate II completion, cement circulated from 1844'feet depth to surface w/ 420 sxs cmt.Drilling Fluid Management Plan REWORK 9/25-20-96  
(Data must be collected from the Reserve Pit)Chloride content        ppm Fluid volume        bblsDewatering method used RECEIVEDLocation of fluid disposal WICHITA KSOperator Name MAY 16 1996Lease Name        License No.       Quarter        Sec.        WICHITA KS S Rng.        E/WCounty        Docket No.       

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

Operator Name Mustang Oil & Gas CorporationLease Name Brown Well # 2Sec. 1 Twp. 10S Rge. 22 East WestCounty Graham

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests ~~run~~ 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.) Yes  No

Samples Sent to Geological Survey

 Yes  No

cores Taken

 Yes  NoElectric Log Run  
(Submit Copy.) Yes  No

List All E.Logs Run:

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
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Name	Top	Datum
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Anhydrite	1820'
Heebner	3528'
Toronto	3550'
Lansing	3568'
B/KC	3794'
Arbuckle	3932'

## CASING RECORD

 New  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 $\frac{1}{4}$ "	8-5/8"	28#	260	Common	160	2%gel,3%CaCl
Production	7-7/8"	4 $\frac{1}{2}$ "	10.5#	3948	HLC	420 (DV) Halco Intc	150 (shoe) 50/50 POZ, salt sat w/ 10

## ADDITIONAL CEMENTING/SQUEEZE RECORD

gils/sx

Purpose:	Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate	Top			
Protect Casing	Bottom			
Plug Back TD				
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
4	3761-70' (New perfs)	900 gals 15%	
2	3652 $\frac{1}{2}$ -3655 $\frac{1}{2}$ ' (Old perfs)		
1	3654'	"	
3	3644 $\frac{1}{2}$ -3646 $\frac{1}{2}$ '		
1	3645 $\frac{1}{2}$	"	
3	3569-3573'	"	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8"	3510'	3510'		

Date of First, Resumed Production, SWD or Inj. Producing Method  Flowing  Pumping  Gas Lift  Other (Explain)  
Injection will begin upon approval

by KCC of application

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

Injection ~~in~~ Interval

<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input checked="" type="checkbox"/> AND	<input checked="" type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	3569-3770' O.A.
	<input type="checkbox"/>	Other (Specify)	