

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 8729
Name: Hertel Oil Co.
Address: 704 EAST 12th
City/State/Zip: Hays, Kansas 67601
Purchaser: Cooperative Refining LLC
Operator Contact Person: David F. Hertel
Phone: (785)628-2445
Contractor: Name: Murfin Drilling
License: 30606
Vite Geologist: Randall Kilian
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back _____ Plug Back Total Depth _____
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Enhr.?) _____ Docket No. _____
12-06-2000 12-13-2000 12-28-2000
Spud Date or Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 051-25069
County: Ellis
Ap. C E 1/2 - NE Sec. 6 Twp. 11 S. R. 17 East West
1355 feet from S / (N) (circle one) Line of Section
790 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Jaco Well #: one
Field Name: Wildcat
Producing Formation: Arbuckle
Elevation: Ground: 1901 Kelly Bushing: 1906
Total Depth: 3561 Plug Back Total Depth: 3531
Amount of Surface Pipe Set and Cemented at 230 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1178 Feet
If Alternate II completion, cement circulated from 1178 (port coll) feet depth to surface w/ 150 sx cmt.
3% DC and 2% gel (cement circulated)

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride Content 24,000 ppm Fluid volume 2600 bbls
Dewatering method used evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

CONSERVATION DIVISION

JAN 22 2001

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 of 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: _____
Title: co-owner Date: January 18, 2001

Subscribed and sworn to before me this 18th day of January, 2001.

Notary Public: Arlene M. Brungardt

Date Commission Expires: 3-20-2001

ARLENE M. BRUNGARDT
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-20-2001

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: Hertel Oil Co. Lease Name: Jaco Well #: one
 Sec. 6 Twp. 11 S. R. 17 East West County: Ellis

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) 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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) L. W. E. Logs Run: <p style="text-align: center;">A total of five logs ran (included)</p>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <p style="text-align: center;">Included----see attached sheet</p>
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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 pipe	12 1/4	8 5/8	28	230	common	150	3%CC/2%gel
Prod. string	7 7/8	5 1/2	15.5 lb	3559	ASC	200	2%gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surface	60/40 Poz	160	6%gel 1/4#floseal
	1178port	collar		

Cuts 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	3473' --- 3475'	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED KANSAS CORPORATION JAN 22 2001 CONSERVATION DIVISION </div>		

TUBING RECORD	Size <u>2 7/8</u>	Set At <u>3483</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr. <u>January 2, 2001</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil <u>X</u>	Bbls. <u>15</u>	Gas Mcf	Water <u>0 (zero)</u>	Bbls.	Gas-Oil Ratio	Gravity <u>30</u>
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Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Sumit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____