FORM MUST BE TYPED

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 # 32034

Name: Hal C. Porter

Address 10004 W 20th St N

City/State/Zip Wichita KS 67212

Purchaser: Cooperative Refining, LLC

Operator Contact Person: Hal C. Porter

Phone (316) 773-3808

Contractor: Name: Murfin Drilling Company, Inc.

License: 30606

Wellsite Geologist: Randall Kilian

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Designate Type of Completion
__X__ New Well _____ Re-Entry _____ Workover

____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
__X__ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator:

Well Name:

Comp. Date _____ Old Total Depth _____

____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD
____ Plug Back _____ PBTD
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
____ Other (SWD or Inj?) Docket No. _____

8/06/99 8/12/99 9/12/99
Spud Date Date Reached TD Completion Date

API NO. 15- 051-25,008

County Ellis

__NE_-_SE__-_SW__-_NW__ Sec. 32 Twp. 11S Rge. 19W ___E ___W

2270 Feet from S (N) (circle one) Line of Section

1250 Feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE. SE. (NW) or SW (circle one)

Lease Name Terry Solomon Well # 32-2

Field Name Zerfas East

Producing Formation Arbuckle

Elevation: Ground 2100 KB 2105

Total Depth 3741 PBTD 3741

Amount of Surface Pipe Set and Cemented at 219 Feet

Multiple Stage Cementing Collar Used? _____ Yes __X__ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 219'
feet depth to Surface w/ 150 sx 60/40 Poz sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content 27,000 ppm Fluid volume 380 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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 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 Hal C Porter

Title President Date

Subscribed and sworn to before me this 30th day of Sept., 19 99.

Notary Public Doris M. McGinnis

Date Commission Expires

DORIS M. McGINNIS
State of Kansas
My Appt. Exp. 12-12-99

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Geologist Report Received

Distribution
✓ KCC ____ SWD/Rep ____ NGPA
____ KGS ____ Plug ✓ Other (Specify)

Form ACO-1 (7-91)

88319

SIDE TWO

Operator Name Hal C. Porter _____ Lease Name _Terry Solomon _____ Well # _32-2_____

Sec. 19___ Twp. 11S__ Rge. 19W ☐ East ☒ West

County __Ellis_____

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.) ☒ Yes ☐ No

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run (Submit Copy.) ☒ Yes ☐ No

List All E.Logs Run: Dual Induction, Borehole Compensated Sonic, Dual Compensated Porosity Log.

☒ Log **Formation (Top), Depth and Datums** ☐ Sample

Name	Top	Datum
Anhydrite	1447	+658
Base	1486	+619
Topeka	3110	-1005
Heebner Shale	3333	-1228
Toronto	3354	-1249
Lansing	3372	-1267
Base KC	3597	-1492
Simpson Dolomite	3660	-1555
Arbuckle	3669	-1564
T.D.	3741	-1636

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 Casing (New)	12-1/4"	8-5/8"	24#	219'	60/40 Pozmix	150	3%CaCl,2%gel
Note: Full returns of cement to surface on Surface Casing Cementing Job.							

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate					
___ Protect Casing					
___ 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

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TUBING RECORD	Size	Set At	Packer At	Liner Run ☐ Yes ☐ No

Date of First, Resumed Production, SWD or Inj.	Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ 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-18.)

METHOD OF COMPLETION ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled _____

☐ Other (Specify) _____ _____