

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 # 6194

Name: ESP Development, Inc.

Address 17746 177th. Blvd.

City/State/Zip Paradise, KS 67548

Purchaser: _____

Operator Contact Person: Bud Eulert

Phone (785) 998-4413

Contractor: Name: Vonfeldt Drilling, Inc.

License: 9431

Wellsite Geologist: Randy Kilian

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD S10W Temp. Abd.

Gas ENHR S10W

Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operators: _____

Well Name: _____

Comp. Date Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

8-22-02 8-28-02 8-28-02

Spud Date Date Reached TD Completion Date

API NO. 15- 051-25153-0000

Ellis

County 148'W & 22'S E
-S/2 - NW - NW Sec. 1 Twp. 11S Rge. 20 W

4268 Feet from S/N (circle one) Line of Section

4768 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 Helen A Well # 1

Field Name Wildcat

Producing Formation _____

Elevation: Ground 2094 KB 2099

Total Depth 3710 PBT

Amount of Surface Pipe Set and Cemented at 236 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/ _____ sx cmt.

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

Chloride content 49,000 ppm Fluid volume 400 bbls

Dewatering method used Allow to dry & backfill

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 Boris Eulert
Title PRESIDENT Date 9-16-02

Subscribed and sworn to before me this 16 day of SEPTEMBER,
19 2002

Notary Public Donald Eulert

Date Commission Expires 7/19/2025

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

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

Operator Name ESP Development Inc.Lease Name Helen "A"Well # 1Sec. 1 Twp. 11 Rge. 20 East WestCounty 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 Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey

 Yes No

Name	Top	Datum
Anhydrite	1501'	+ 598
Base	1547'	+ 552
Topeka	3118'	-1019
Heeb. Sh.	3335'	-1236
Toronto	3359'	-1260
Lansing	3373'	-1274
Base Kc.	3583'	-1484
Arbuckle	3703'	-1604
T.D.	3710'	-1611

Cores Taken

 Yes NoElectric Log Run
(Submit Copy.) Yes No

List All E.Logs Run: None

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	23#	236	60/40 Poz	150	3% Gel 2% CC.

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

TUBING RECORD	SIZE	SET AT	PACKER AT	LINER RUN	□ Yes []

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:	METHOD OF COMPLETION	PRODUCTION INTERVAL
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit 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) <u>L&A</u>	