

6099a

**COPY**

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

API NO. 15- 051-25048  
County Ellis  
-NW -NW - NW Sec. 8 Twp. 11S Rge 20 X W

Operator: License # 30606  
Name: Murfin Drilling Co., Inc.  
Address 250 N. Water, Suite 300  
City/State/Zip Wichita, KS 67202

380 Feet from SN (circle one) Line of Section  
200 Feet from E/W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner: KCC  
NE, SE, NW or SW (circle one)

Purchaser: \_\_\_\_\_  
Operator Contact Person: Larry M. Jack  
Phone (316) 267-3241  
Contractor: Name: Murfin Drilling Co., Inc.  
License: 30606

Lease Name PFEIFER Well # 1-8 SEP 2000  
Field Name Unknown  
Producing Formation Arbuckle

Wellsite Geologist: Randy Kilian  
Designate Type of completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

Elevation: Ground 2042 KB 2047  
Total Depth 3775 PBTB  
Amount of Surface Pipe Set and Cemented at 220 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 1524 Feet  
If Alternate II completion, cement circulated from 1524  
feet depth to surface w/ 180 sx cmt.

If Workover/Re-Entry: old well info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Inj/SWD  
 Plug Back  PBTB  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_  
1/00 8/10/00 8/18/00  
Spud Date Date Reached TD Completion Date  
08/01/00

Drilling Fluid Management Plan As 11 8/21/01 JB  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume 2500 bbls  
Dewatering method used Evaporation  
Location of fluid disposal if hauled offsite: RELEASED  
Operator Name \_\_\_\_\_ OCT 15 2001  
Lease Name \_\_\_\_\_ License No. FROM CONFIDENTIAL  
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, in 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 Larry M. Jack  
Title Larry M. Jack, Production Manager Date \_\_\_\_\_  
Subscribed and sworn to before me this 11th day of Sept. 2000.  
Notary Public Barbara J. Dodson  
Date Commission Expires 12/16/03

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)  
IOG

BARBARA J. DODSON  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. 12-16-03

6099b

SIDE TWO

Operator name Murfin Drilling Co., Inc.

Lease Name Pfeifer Well # 1-8

Sec. 8 Twp. 11 S Rge. 20W  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.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums Name Top Datum See attached
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Electric Log Run (Submit Copy.) List all E.Log	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

CASING RECORD <u>  </u> New <u>  </u> 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 1/4"	8 5/8"	24#	220	Comm.	160	3% cc, 2% gel
Production	7 7/8'	5 1/2'		3759'	AH2	120	

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top/Btm	Type of Cement	# Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Csg				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
4	3663-65		100gals 15%MCA	3663-65

TUBING RECORD	Size <u>2 7/8</u>	Set At <u>3688</u>	Packer At	Liner <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. <u>9/2/00</u>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other
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Estimated Production Per 24 Hours	Oil <u>31</u> Bbls	Gas <u>  </u> Mcf	Water <u>38</u> Bbls	Gas-Oil Ratio	Gravity
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Disposition of Gas:  Vented  Sold  Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval: As above

COBA

EL00b