

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

Operator: License # 30705Name: Younger Energy Company
Address 453 S. Webb Rd. Suite 100City/State/Zip Wichita, KS 67207Purchaser: FarmlandOperator Contact Person: Steve MoorePhone (316) 681-2452Contractor: Name: na

License: _____

Wellsite Geologist: _____

Designate Type of Completion

 New Well Re-Entry Workover

<input type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> SIOW	<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/Reentry: Old Well Info as follows:

Operator: F&M OIL CompanyWell Name: Wolf "I" #2Comp. Date 6/17/84 Old Total Depth 4700'

<input type="checkbox"/> Deepening	<input type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to Inj/SWD
<input type="checkbox"/> Plug Back		<input type="checkbox"/> PBD
<input type="checkbox"/> Commingled		<input type="checkbox"/> Docket No. _____
<input type="checkbox"/> Dual Completion		<input type="checkbox"/> Docket No. _____
<input type="checkbox"/> Other (SWD or Inj?) Docket No. <u>E-27,267</u>		

Spud Date 1/99 Date Reached TD 9/20/99 Completion Date _____API NO. 15- 063-20-767-0001

COPY

County Cove E- SW-SW-SE Sec. 24 Twp. 11 Rge. 26 E W330' Feet from SYN (circle one) Line of Section2310' Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name Wolf "I" Well # 2Field Name TroveInjection Producing Formation LKCElevation: Ground 2580' KB 2590Total Depth 4700' PBD 4070'Amount of Surface Pipe Set and Cemented at 345 FeetMultiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2000feet depth to 330' w/ 400 sx cmt.Drilling Fluid Management Plan Re-work, 10-1-99
(Data must be collected from the Reserve Pit) U.C.

na

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite:

Operator Name _____

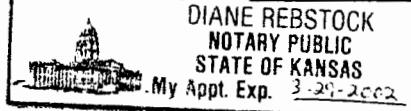
Lease Name _____ License No. _____

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. R. 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 Steve MooreTitle Mgr. Exploration & Prod. Date 9/23/99Subscribed and sworn to before me this 23rd day of SEPTEMBER, 19 99.Notary Public DiAnne RebstockDate Commission Expires MARCH 29, 2002

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

Form ACO-1 (7-91)

98731

SIDE TWO

Operator Name Younger Energy CompanyLease Name Wolf "I" Well # 2Sec. 24 Twp. 11 Rge. 26 East WestCounty Gove

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 NoElectric Log Run
(Submit Copy.) Yes No

List All E.Logs Run:

 Log Formation (Top), Depth and Datums Sample

Name

Top

Datum

na

Gamma Ray Bond Log attached

CASTING 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 1/4	8 5/8	24#	345	60/40	175	
production	7 7/8	4 1/2	10.5 #	4190	common	100	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing	330/2000	60/40 pos	400	2% cc
Plug Back TD				
X 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
3 SPF	2000' & 1150'	see above	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8	3750	3750		

Date of First, Resumed Production, SWD or Inj. on approval	Producing Method	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> SWD inj. Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	na				

Disposition of Gas: METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.) Open Hole Perf. Dually Comp. Commingled _____

Other (Specify) _____