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SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM  
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # ..... 5063 .....  
Name .. Energy Exploration, Inc. ....  
Address 1002 South Broadway .....  
City/State/Zip .. Wichita, KS 67211 .....

Purchaser..... Koch Oil Co. ....

Operator Contact Person .. Brad D. Lehl .....  
Phone ..... 316-267-7336 .....

Contractor: License # ..... 5422 .....  
Name .. Abercrombie Drilling, Inc. ....

Wellsite Geologist..... Ralph White .....  
Phone..... 316-263-3081 .....

Designate Type of Completion  
 New well     Re-Entry     Workover  
  
 Oil                     SWD                     Temp Abd  
 Gas                     Inj                     Delayed Comp.  
 Dry                     Other (Core, water supply etc.)

If OWWO: old well info as follows:  
Operator .....  
well Name ..... N/A .....  
Comp. Date ..... Old Total Depth.....

WELL HISTORY

Drilling Method:  
 Mud Rotary     Air Rotary     Cable  
  
..2-10-86...    ..2-21-86...    ...2-21-86...  
Spud Date        Date Reached TD    Completion Date  
  
....4690!...    ...N/A.....  
Total Depth        PBTD

Amount of Surface Pipe Set and Cemented at 306 feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set... 2548 ..... feet  
If alternate 2 completion, cement circulated  
from... 2548 ..... feet depth to... surface... 600 SX cmt

API NO. 15-..... 109-20,412 .....  
County..... Logan .....  
SE .. NW .. NW .... Sec... 1... Twp. 11S Rge. 32...  East  West

... 4290 ... Ft North from Southeast Corner of Section  
... 4290 ... Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

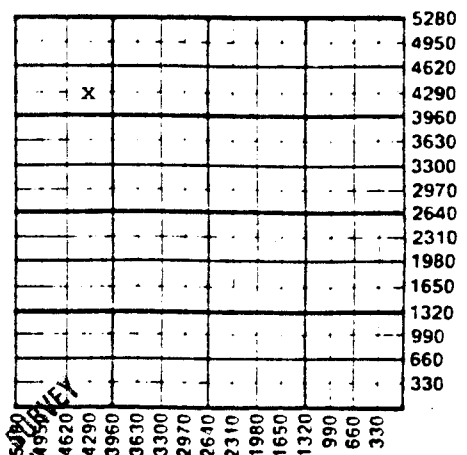
Lease Name..... Stoll ..... Well #..... 1 .....

Field Name..... Wildcat .....

Producing Formation..... Cherokee .....

Elevation: Ground..... 3034' ..... KB..... 3039' .....

Section Plat



MAY 12 1986  
KANSAS GEOLOGICAL SURVEY  
WICHITA BRANCH

WATER SUPPLY INFORMATION  
Disposition of Produced Water:  Disposal  Repressuring  
Docket .....

Questions on this portion of the ACO-1 call:  
Water Resources Board (913) 296-3717  
Source of Water:  
Division of Water Resources Permit #.....  
 Groundwater.....Ft North from Southeast Corner (well) .....Ft West from Southeast Corner of Sec Twp Rge  East  West  
 Surface Water.....Ft North from Southeast Corner (Stream, pond etc).....Ft West from Southeast Corner Sec Twp Rge  East  West  
 Other (explain)... City of Oakley ..... (purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. Submit CP-4 form with