

SIDE ONE

Ind

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 # 9896
Name Bonray Energy Corporation
Address P.O. Box 20746
City/State/Zip Oklahoma City, OK 73156

Purchaser.....

Operator Contact Person Lee Troiani
Phone (405) 848-6891

Contractor: License # 5107
Name H-30, Inc.

Wellsite Geologist.....
Phone.....

Designate Type of Completion

- New Well Re-Entry Workover
- Oil SWD Temp Abd
- Gas Inj Delayed Comp.
- Dry Other (Core, Water Supply etc.)

If ONNO: old well info as follows:

Operator
Well Name
Comp. Date Old Total Depth.....

WELL HISTORY

Drilling Method:

- Mud Rotary Air Rotary Cable

8-28-85	9-4-85	9-7-85
.....
Spud Date	Date Reached TD	Completion Date
4699'
.....
Total Depth	PBTD	

Amount of Surface Pipe Set and Cemented at 260 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to.....w/.....SX cmt

API NO. 15-195-21,764

County Trego

C. SW SW SE Sec. 6 Twp. 12S Rge. 25 East West

330 Ft North from Southeast Corner of Section
2310 Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

Lease Name Morell Well # 6-1

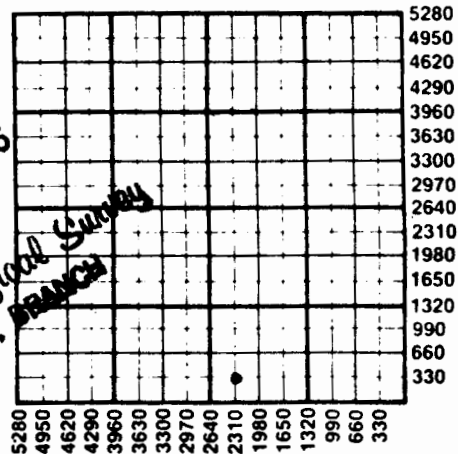
Field Name.....

Producing Formation.....

Elevation: Ground 2587' KB 2592'

Section Plat

JAN 15 1985
State Geological Survey
WICHITA BRANCH



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

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).....
(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 all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

SIDE TWO

Operator Name Bohray Energy Corporation Lease Name Morell Well # 6-1

Sec. 6 Twp. 12S Rge. 25 East West County Trego

WELL LOG

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 Yes No
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
Sand & shale	0	218'
Shale	218'	1504'
Shale & lime	1504'	1661'
Sand & shale	1661'	2316'
Shale & lime	2316'	3230'
Lime & shale	3230'	3905'
Lime	3905'	4699'
Rotary total depth	4699'	

JAN 15 1986
 State Geological Survey
 WICHITA BRANCH

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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#	260'	60/40p02	200	3%cc, 2%gel

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth

TUBING RECORD			
Size	Set At	Packer at	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First Production	Producing Method
	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....