

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

COPY

7635

Operator: License # 30798

Name: Overland Exploration Company

Address 200 E. First St. #505

City/State/Zip Wichita, KS 67202

Purchaser: N/A

Operator Contact Person: Joel A. Alberts

Phone (316) 262-6391

Contractor: Name: Blue Goose Drilling Co., Inc.

License: 5104

Wellsite Geologist: Joel A. Alberts

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, MSW, Expl., Cathodic, etc)

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 PSTD
 Commingled Decklet No. _____
 Dual Completion Decklet No. _____
 Other (SWD or Inj?) Decklet No. _____

11-18-92 11-30-92 11-30-92
Spud Date Date Reached TD Completion Date.

API NO. 15- 109-20,543

County Logan

c. SW SE NW Sec. 27 Twp. 12S Rge. 33W

2970' Feet from (S)N (circle one) Line of Section

3630' 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 Messerli Well # 1

Field Name W.C.

Producing Formation N/A

Elevation: Ground 3121 KB 3128

Total Depth 4745 PSTD _____

Amount of Surface Pipe Set and Cemented at 248" Ft

Multiple Stage Cementing Collar Used? Yes NO

If yes, show depth set _____ Ft

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ SX CR

Drilling Fluid Management Plan 1-11-93
(Data must be collected from the Reserve Pit)

Chloride content 28,000 ppm Fluid volume 800 bt

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Decklet No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 208 Colcord Derby Building, 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 Joel A. Alberts

Title OWNER / GEOLOGIST Date 12/21/92

Subscribed and sworn to before me this 21st day of December

19 92.

Notary Public Wilma E. Clark
WILMA E. CLARK
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. Aug. 5, 1996

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

Operator Name Overland Exploration Company Lease Name Messerli Well # 1
 County Logan
 Sec. 27 Twp. 12S Rge. 33
 East
 West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time test 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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	2603'	(+525)
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	B/ Anhy.	2625'	(+503)
List All E.Logs Run: Rad. Guard		Heebner	4036'	(-908)
		Lansing-K.C.	4080'	(-952)
		Stark	4309'	(-1181)
		B.K.C.	4374'	(-1246)
		Pawnee	4511'	(-1383)
		Ft. Scott	4566'	(-1438)
		Cherokee	4594'	(-1466)
		Miss.	4708'	(-1580)

CASING RECORD <input type="checkbox"/> New <input checked="" 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"	20#	248'	60/40 poz	150	3%cc, 2 nd

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<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) Dep.

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Date of First, Resumed Production, SUD or Inj.	Producing Method	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)						
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Grav

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 _____