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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

Operator: License # 6039

Name: L. D. Drilling, Inc

Address RR 1 Box 183 B

City/State/Zip Great Bend KS, 67530

Purchaser: NCRA

Operator Contact Person: L. D. Davis

Phone (316) 793-3051

Contractor: Name: L. D. Drilling, Inc.

License: 6039

Wellsite Geologist: Kim Shoemaker

Designate Type of Completion
 New Well Re-Entry Workover

Oil S/W S/W Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: _____
Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/S/W
 Plug Back PBD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (S/W or Inj?) Docket No. _____

3-29-96 4-07-96 4-13-96
Spud Date Date Reached TD Completion Date

API NO. 15- 063-214930000

County Gove

- - NE - NE Sec. 30 Twp. 14 Rge. 30 ^E

660 Feet from S (circle one) Line of Section

660 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 NORTH GLENN Well # #2-30

Field Name na

Producing Formation Mississippi

Elevation: Ground 2760' KB 2765'

Total Depth 4475' PBTD _____

Amount of Surface Pipe Set and Cemented at 267 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2280 Feet

If Alternate II completion, cement circulated from 2280

feet depth to surface w/ 300 sx cmt.

Drilling Fluid Management Plan ART II DPW
(Data must be collected from the Reserve Pit) 2-28-97

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. 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 L. D. Davis L. D. Davis

Title President Date 9-3-96

Subscribed and sworn to before me this 3rd day of Sept 19 96.

Notary Public Bessie M. DeWerff Bessie M DeWerff

Notary Commission Expires 5-20-97

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC S/W/Rep NGPA
 KGS Plug Other (Specify)

STATE CORPORATION COMMISSION

Form ACO-1 (7-91)

NOTARY PUBLIC - State of Kansas
BESSIE M. DEWERFF
My Appt. Exp. 5-20-97

SEP 4 1996

SIDE TWO

Operator Name L. D. Drilling, Inc

Lease Name NORTH GLENN

Well # 2-30

Sec. 30 Twp. 14 Rge. 30

East
 West

County 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 Yes No
(Attach Additional Sheets.)
Samples Sent to Geological Survey Yes No
Cores Taken Yes No
Electric Log Run Yes No
(Submit Copy.)

Log Formation (Top), Depth and Datum Sample
Name Top Datum
see attached copy

List All E.Logs Run:
See attached sheet
Dual induction later log
Computer analyzed log
Compensated density dual spaced
neutron log

CASING RECORD

New Used

Report all strings set-conductor, surface, intermediate, production, etc.

Purpose of String	Size Hole Drilled	Size Casing Set (In D.O.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
surface casing	12 1/2	8 5/8"	28#	267'	60/40 poz	190	2% gel 3% CC
Production		4 1/2	10 1/2#	4470'	Top stage	50 sx EA 2, 3% cal	
			5# gil. per sx	.75 Halad 322			

ADDITIONAL CEMENTING/SQUEEZE RECORD 2nd stage: 300 sx Mid-cont. 2 W/flo/seal & 2% c

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4 spf	4334-4342	1000 gal 28% NE	4334-4342

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	2 3/8"	4467'			

Date of First, Resumed Production, SMD or Inj. 4-14-96 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	9		9		

Disposition of Gas: Vented Sold Used on Lease (if vented, submit ACO-18.)
METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 4334-4342
 Other (Specify) _____

NOTARY PUBLIC - State of Kansas
BESSIE M. DEWEERT
Notary Public