

COPY

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

API NO. 15- 199-20178 0001

County Wallace

-NW-NE-NW Sec. 20 Twp. 15S Rge. 42 ^E _W

4680 Feet from (S) N (circle one) Line of Section

3730 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 BHY Well # 1-20

Field Name Stockholm

Producing Formation Morrow

Elevation: Ground 3935 KB 3940

Total Depth 5300 PBTD _____

Amount of Surface Pipe Set and Cemented at 8 5/8 @ 362 Feet

Multiple Stage Cementing Collar Used? / Yes _____ No

If yes, show depth set 2006 Feet

If Alternate II completion, cement circulated from unable Squeezed
feet depth to 1550-1570 w/ 100 SxS + 100 Sx down Backs

Drilling Fluid Management Plan REWORK J# 8-18-97
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used RECEIVED

Location of fluid disposal if hauled offsite:
KANSAS CORPORATION COMMISSION

Operator Name _____

MAY 05 1997

Lease Name _____ License No. _____

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

County _____ Docket No. _____

Operator: License # _____

Name: Trans-Western Operating Co

Address PO 276

City/State/zip Golden CO 80402

Purchaser: SI

Operator Contact Person: Douglas Isern

Phone (303) 446-0828

Contractor: Name: Mar-Fin Drilling Co. T&T Well Service

License: 9343

Wellsite Geologist: Russell Bak

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover/Reentry: Old Well Info as follows:

Operator: Trans-Western Operating Co

Well Name: BHY #1-20

Comp. Date 9-16-89 Old Total Depth 5300

SQUEEZED WITH CEMENT
 Deepening Re-perf. Conv. to Inj/SMD
 Plug Back PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SMD or Inj?) Docket No. _____
3-16-90 4/28/90

Date of START Date Reached TD WORKOVER Completion Date of WORKOVER

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.

This form replaces ACO-1 filed 6-28-90 and by KCC ATTACHED HERETO

Signature _____

Title President Date 4/14/97

Subscribed and sworn to before me this 4th day of April, 1997.

Notary Public Jay Kuban

Date Commission Expires 8-22-97

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

Operator Name Trans Western Operating Co

Lease Name BHY

Well # 1-20

Sec. 20 Twp. 15 Rge. 42
 East
 West

County Wallace

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.)
 List All E.Logs Run: Neutron Density Radiation Log

Name	Top	Datum
MORROW SHALE	5058'	
MORROW SAND	5105'	
MORROW LIME	5132'	
ST. GENEVIEVE	5198'	
ST. LOUIS	5261'	

CASING RECORD <input checked="" 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#	362	Lite Common	125 75	3% CaCL
Production	7 7/8"	5 1/2"	15.5#	5299	Sackfill	150	

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	1550/1570		2000XS	"A" Poz. mix CaCL

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) Depth	
4	5124-30			
4	5112-5126			
4	1550-1570		For Squeeze	

TUBING RECORD		Size	Set At	Packer At	Liner Run
					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj.			Producing Method		
<u>SIGW</u>			<input checked="" 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	Gravity
		2,940			

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) SHUT IN

Production Interval: 5112'-5130'