

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE ORIGINAL

Operator: License # 8507
Name: Paxco, Inc.
Address: 8920 Peppertree Circle
City/State/Zip: Wichita, Ks. 67226
Purchaser: SWD
Operator Contact Person: Jay C. Clark
Phone: (316) 634-1714
Contractor: Name: Diamond Well Service
License: _____
Wellsite Geologist: Jay C. Clark
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Imperial Oil Co.
Well Name: Herrman Bl

Original Comp. Date: 7-26-62 Original Total Depth: 3624
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date
<u>5-8-01</u>	<u>2260</u>	<u>6-14-01</u>

API No. 15 - 165-00311-00-01
County: Rush
NE NE SW Sec. 2 Twp. 16 S. R. 18 East West
2310 feet from (S) (circle one) Line of Section
2970 feet from (E) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW (SW)
Lease Name: Legleiter Well #: B1
Field Name: N/A
Producing Formation: Chase Group
Elevation: Ground: 2003 Kelly Bushing: 2011
Total Depth: 2260 Plug Back Total Depth: 2224
Amount of Surface Pipe Set and Cemented at 1154 Feet
Multiple Stage Cementing Collar Used? N/A Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

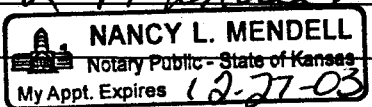
Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
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 of 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: Paxco Inc. By Jay C. Clark
Title: President Date: 10-22-01
Subscribed and sworn to before me this 22 day of June, 2001.

Notary Public: Nancy L Mendell
Date Commission Expires: _____



KCC Office Use ONLY
N Letter of Confidentiality Attached
If Denied, Yes Date: _____
N Wireline Log Received
N Geologist Report Received
____ UIC Distribution

X

Operator Name: Paxco, Inc. Lease Name: Legleiter Well #: Herrman Bl
 Sec: 2 Twp: 16 S: R 18 East West County: Rush

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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

List All E. Logs Run: OIC FILE
CEMENT BOND
GAMMA RADIATION

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	# Sacjs Used	Type and Percent Additives
SWD	7 7/8	5 1/2"	15 1/2 #	2224	Common	150	3% CC

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
25PF	2134-2146	1000 Gallons, 15% HCL	
25PF	2104-2114	1000 Gallons, 15% HCL	

TUBING RECORD	Size <u>2 3/8</u> Set At _____ Packer At <u>2060</u>	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____