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COPY

RELEASED SIDE ONE

KCC

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

API NO. 15- 071-20,545
County Greeley SEP 17
SE SE SE Sec. 10 Twp. 16S Rge. 12E East West

Operator: License # 30658
Name: Coastal Oil & Gas Corp
Address 211 N. Robinson, Suite 1700
One Leadership Square
City/State/Zip Oklahoma City, OK 73102

330 Ft. North from Southeast Corner of Section
330 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name O'Dell Well # 1-10
Field Name Sidney
Producing Formation Dry

Purchaser: _____
Operator Contact Person: John D. Perry
Phone (405) 239-7031

Elevation: Ground 3815' KB 3824'
Total Depth 5250' PBDT _____

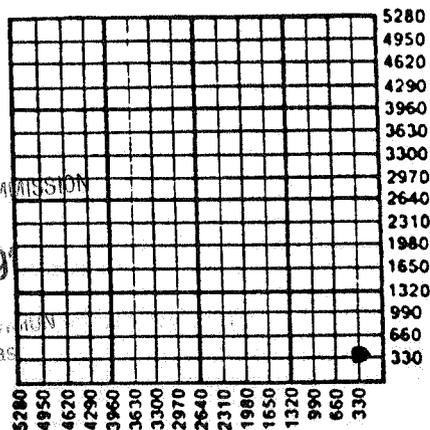
Contractor: Name: Murfin Drlg. Co.
License: _____
Wellsite Geologist: Richard Orsak

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

RECEIVED
STATE CORPORATION COMMISSION

SEP 23 1991

State of Oklahoma
Wichita, Kansas



A/T II DVA

If OAWO: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

Amount of Surface Pipe Set and Cemented at 320 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from D&A

Drilling Method:
 Mud Rotary Air Rotary Cable
8-9-91 8-18-91 8-18-91
Spud Date Date Reached TD Completion Date

feet depth to _____ w/ _____ sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 [Signature]
Title Dist. Drlg. Supt. Date 9-15-91

Subscribed and sworn to before me this 17 day of Sept.,
19 91.

Notary Public Linda Black

Date Commission Expires Nov. 28, 1994

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SIDE TWO

Operator Name Coastal Oil & Gas Corp. Lease Name O'Dell Well # 1-10
 Sec. 10 Twp. 16S Rge. 42 East West
 County Greeley

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.) DIL, BHC, CNL	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> </thead> <tbody> <tr><td>Topeka</td><td>3864</td><td></td></tr> <tr><td>Hebner</td><td>3075</td><td></td></tr> <tr><td>Lansing</td><td>4157</td><td></td></tr> <tr><td>Drum Ls.</td><td>4306</td><td></td></tr> <tr><td>Morrow</td><td>5023</td><td></td></tr> <tr><td>L. Morrow</td><td>5098</td><td></td></tr> <tr><td>Miss.</td><td>5174</td><td></td></tr> </tbody> </table>	Name	Top	Bottom	Topeka	3864		Hebner	3075		Lansing	4157		Drum Ls.	4306		Morrow	5023		L. Morrow	5098		Miss.	5174	
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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 Perc Additives
Surface	12-1/4	8-5/8	24	321	Class A	225	CaCl 2%
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			Depth			(Amount and Kind of Material Used)
	NA			NA			
TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No		
NA							
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
NA							
Estimated Production Per 24 Hours		Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio		Gravity
NA							

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

METHOD OF COMPLETION Open Hole Perforation Dually Completed Commingled Other (Specify) Dry

Production Interval