

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

Operator: License # 6496
Name: Ira Stephens, Jr.
Address RT # 2 Box 75

City/State/zip Kincaid, KS 66039
Purchaser: NCRA
Operator Contact Person: Ed stephens
Phone (316) 564-2909
Contractor: Name: _____
License: _____
Wellsite Geologist: None

Designate Type of Completion
____ New Well Re-Entry ____ Workover
 Oil ____ SWD ____ SLOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:
Operator: Petroleum Inc.
Well Name: Essmiller -C-
Comp. Date 6-5-53 Old Total Depth 3435
____ Deepening Re-perf. ____ Conv. to Inj/SWD
 Plug Back 3400' PBTB
____ Comingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Inj?) Docket No. E 27, 155
1-16-96 1-17-96
Date OF REENTRY Date Reached TD Completion Date

API NO. 15- 13-19-14W
County Barton County
NW -SW -SW - Sec. 13 Twp. 19 Rge. 14 X
990 Feet from SW (circle one) Line of Section
4950 Feet from EA (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Essmiller C Well # 1
Field Name Essmiller Wildcat
Producing Formation LKC "H"
Elevation: Ground 1872 KB GI
Total Depth 3504 PBTB 3435
Amount of Surface Pipe Set and Cemented at 797 Feet
Multiple Stage Cementing Collar Used? ____ 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 50 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: None
Operator Name _____
Lease Name Essmiller C License No. 6498
SW Quarter Sec. 13 Twp. 19 S Rng. 14 E/W
County Barton Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 1305 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 CONFIDENTIAL 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 IRA STEPHENS JR
Title owner operator Date 1-25-96
Subscribed and sworn to before me this 26th day of Jan.
19 96
Notary Public Deanna K Krull
Date Commission Expires 2/20/97

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

DEANNA K. KRULL
Notary Public - State of Kansas
My Appt. Expires

COPY

COPY

SIDE TWO

Operator Name I & F Farms

Lease Name Essmiller

Well # 1

Sec. 13 Twp. 19 Rge. 14W

East

County Barton

West

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: GAMMA RAY/NEUTRON

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
LKC	3213-3215	
LKC	3226-3235	

CASING RECORD

New 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
Water	12 1/4	8 5/8	24	797	Common	400	None
Oil Sting	7 7/8	4 1/2	10 lb.	3454	--	75	--

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: None	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
		Amount	Kind	
2	3213-3215	250 gal	28%	
2	3226-3235	250 gal	28%	
	P Plug at 3400			
2	3386'-3392' 3326'-3335' 3363'-3368' 3346'-3354'			

TUBING RECORD		Size	Set At	Packer At	Liner Run	
		2 7/8	3200	3200	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SLD 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 Bbls.	Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	15		None	50	None	

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.)

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

3213-3235'