

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

COPY

APR NO. 15-083-21,364

OCT 13

County Hodgeman

CONFIDENTIAL

SW - NE - SW - Sec. 1 Twp. 21S Rge. 24

Operator: License # 4767

1650 Feet from S/N (circle one) Line of Section

Name: Ritchie Exploration, Inc.

3630 Feet from E/W (circle one) Line of Section

Address 125 N. Market, Suite 1000

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Wichita, KS 67202

Lease Name McCreight Well # 2

City/State/Zip _____

Field Name Goebine

Purchaser: Koch Oil Company

Producing Formation Mississippian Dolomite

Operator Contact Person: A. Scott Ritchie III

Elevation: Ground 2271' KB 2276'

Phone (316) 267-4375

Total Depth 4460' PBDT n/a

Contractor: Name: _____

Amount of Surface Pipe Set and Cemented at 205' Feet

License: _____

Multiple Stage Cementing Collar Used? Yes _____ No

Wellsite Geologist: _____

If Yes, show depth set 1490' Feet

Designate Type of Completion

Alternate II completion, cement circulated from 1490'

New Well Re-Entry

feet depth to surface w/ 200 sx cmt.

Oil SWD SIOW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, MSW, Expl., Cathodic, etc)

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

If Workover/Re-Entry: old well info as follows:

Chloride content _____ ppm Fluid volume _____ bbls

Operator: Ritchie Exploration, Inc.

Dewatering method used _____

Well Name: McCreight #2

Comp. Date 10-02-91 Old Total Depth 4460'

Location of fluid disposal if hauled offsite: _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBDT

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

Operator Name _____

Lease Name _____ License No. _____

3-25-91 4-2-91 4-16-91

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

Spud Date _____ Date Reached TD _____ Completion Date _____

County _____ Docket No. _____

PLEASE KEEP THIS INFORMATION CONFIDENTIAL

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 by the State of Kansas 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]

DEC 08 1992

Title President

FROM CONFIDENTIAL

Subscribed and sworn to before me this 12 day of November, 1991.

Notary Public Lisa Thimmesch

Date Commission Expires _____

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

W Wireline Log Received

C Geologist Report Received

RECEIVED

Distribution

STATE CORPORATION COMMISSION SVD/Rep NGPA

plug Other (Specify) _____

NOV 14 1991

LISA THIMMESCH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 8-29-95

Operator Name Ritchie Exploration, Inc. Lease Name McCreight Well # 2

Sec. 1 Twp. 21 Rge. 24W East West
 County Hodgeman

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests in 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:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set at surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set	Weight	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

PLEASE KEEP THIS INFORMATION CONFIDENTIAL

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
3	4387'-4391' Miss.	500 gal 15% MCA	

TUBING RECORD Size 2 7/8" Set At 4368' Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 10-5-91 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 4.5 Bbls. Gas 192.61 Mcf Water _____ Bbls. Gas-Oil Ratio _____ Gral

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