

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

Operator: License # 5210

Name: Lebsack Oil Production, Inc.

Address P.O. Box 489

City/State/Zip Hays, KS 67601

Purchaser: _____

Operator Contact Person: Rex Curtis

Phone (785) 625-5444

Contractor: Name: Abercrombie RTD, Inc.

License: 30684

Wellsite Geologist: Wayne Lebsack

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

10-1-99 10-8-99 10-8-99
Spud Date Date Reached TD Completion Date

API NO. 15- 093-216510000

County Kearny

NW - NW SW - Sec. 13 Twp. 21S Rge. 35 E

2310 Feet from S (circle one) Line of Section

330 Feet from E (circle one) Line of Section

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

Lease Name CBH Well # 1-13

Field Name Christabelle

Producing Formation NONE

Elevation: Ground 3105 est KB 3110 est

Total Depth 5000 PSTD _____

Amount of Surface Pipe Set and Cemented at 250' 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 PFA 11-2-99 v.c.
(Data must be collected from the Reserve Pit)

Chloride content 52,000 ppm Fluid volume 1,280 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

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 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.

Signature Margie Curtis, V.P.
Title _____ Date _____

Subscribed and sworn to before me this 26 day of October, 19 99.

Notary Public D. Rex Curtis
Date Commission Expires _____

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)
IDB

 **D. REX CURTIS**
Notary Public - State of Kansas
My Appt. Expires 7-28-2001

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.)

Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
Heebner	3932	- 840
Lansing	3983	-891
BKC	4459	-1366
Marmaton	N/A	-1386
Cherokee	4615	-1524
Morrow	4814	-1722
Morrow/Sd	4878	-1786
Mississippi	4890	-1798

List All E.Logs Run: *Microresistivity Log,
Dual Compensated Porosity,
Dual Induction.*

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
Surface	12 1/4"	8 5/8"	24#	250'	60/40 Pos	225	2% gel, 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				

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

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

TUBING RECORD

Size _____ Set At _____ Packer At _____ Liner Run Yes No

Date of First, Resumed Production, SMD or Inj. *P&A*

Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <i>N-A</i>	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: **METHOD OF COMPLETION**

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

Open Hole Perf. Dually Comp. Commingled

Production Interval _____

Other (Specify) _____