

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

Operator: License # 4779
Name: North American Resources Co.
Address 16 E. Granite
City/State/Zip Butte, Montana 50701
Purchaser: n/a
Operator Contact Person: Jim Else
Phone (406) 723-5421
Contractor: Name: Chief Drilling, Inc.
License: 5886
Wellsite Geologist: Wes Hansen

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD S10W Temp. Abd.
 Gas ENHR S16W
 Dry Other (Core, USW, Expl., Cathodic)

If Workover/Re-Entry: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PSTD
 Commingled Decklet No. _____
 Dual Completion Decklet No. _____
 Other (SWD or Inj?) Decklet No. _____
Spud Date _____ Date Reached TD _____ Completion Date _____

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 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 James Else
Title Superintendent of Engineering Date 12/1/93
Subscribed and sworn to before me this 1st day of December, 1993.
Notary Public J. A. O'Neil
Date Commission Expires May 24, 1994

API NO. 15- 093-21,295
County Kearny
75' NW SE SE SE Sec. 11 Twp. 21S Rge. 35W
368 FSL Feet from S/W (circle one) Line of Section
367 FEL Feet from E/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner: NE, SE, NW or SW (circle one)
Lease Name Crist Twin Well # 11-1
Field Name _____
Producing Formation none
Elevation: Ground 3104 KB 3111
Total Depth 5010 PSTD ---
Amount of Surface Pipe Set and Cemented at 325' Feet
Multiple Stage Cementing Collar Used? Yes No
EIVED
_____ show depth set _____ Feet
If Alternate II completion, cement circulated from _____
7 1993 feet depth to _____ w/ _____ sx cmt.
_____ Fluid Management Plan D & A JH 2-21-94
(Data must be collected from the Reserve Pit)
Chloride content 16,000 ppm Fluid volume 500 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
_____ Quarter Sec. _____ Twp. _____ S Ang. _____ E/W
County _____ Decklet No. _____

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)

Operator Name North American Resources Co. Lease Name Crist Twin Well # 11-1

Sec. 11 Twp. 21S Rge. 35W East

County Kearny

PI # 15-093-21295

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:
 Induction/GR
 Focused Log/GR
 Compensated Z-Densilog
 Compensated Neutron
 Acoustilog/GR

Computed Diplog
Stratadip

Name	Top	Datum
Base/Anhy	2214	+ 897
Heebner	3934	- 823
Lansing	4056	- 945
Marmation	4489	-1378
Pawnee	4595	-1484
Cherokee	4638	-1527
Atoka	4784	-1673
Morrow Sh.	4865	-1754
Morrow Sd.	4914	-1803
Mississippian	4931	-1820

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	20#	325'	60/40 pozmix	225	3% cc, 2% g

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	STATE CORROSION TRANSMISSION	Acid Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD 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 Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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 _____