

38521

FORM MUST BE TYPED

CONFIDENTIAL

Am

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

API NO. 15- 083-21447-01-00

County Hodgeman

SW-SW-SE-SW Sec. 25 Twp. 22S Rge. 23 X ^EW

205 Feet from S (circle one) Line of Section

1458 Feet from E (circle one) Line of Section

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

Lease Name Billings Well # 1 Hz

Field Name Oppy South

Producing Formation Mississippian Osage

Elevation: Ground 2281 KB _____

Total Depth 6856 feet MD PBTD 6856 feet MD

Amount of Surface Pipe Set and Cemented at 540.7 Feet

Multiple Stage Cementing Collar Used? _____ Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan AH-1, 10-28-99 v.c.
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used None, Fluids Removed offsite

Location of fluid disposal if hauled offsite: _____

Operator Name Buried Hills Production Company, Inc.

Lease Name Whitley #2 Hz License No. 31961

SE Quarter Sec. 13 Twp. 20 S Rng. 23 (E/W)

County Ness Docket No. 194,853-C (C-28,102)

Operator: License # 31961

Name: Buried Hills Production Company Inc

Address 1000, 112 - 4th Avenue S.W.

City/State/Zip Calgary, Alberta, Canada
12P 0R3

Purchaser: _____

Operator Contact Person: Bud Berger

Phone (316) 339-3848

Contractor Name: Nabors Drilling

License: 32105

Wellsite Geologist: Jeffrey Barkley, Barry Fisler

Design Type of Completion
 New Well Re-Entry Workover

Oil SMD SIO/W Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____ NOV 20

Comp. Date _____ Old Total Depth _____

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

July 26, 1997 August 23, 97
Spud Date Reached TD Completion Date

RELEASED

FEB 25 2000

FROM CONFIDENTIAL

CONFIDENTIAL

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.

NOV 20 1997

Signature [Signature]

Title MANAGER OPERATIONS Date 97/11/19

Subscribed and sworn to before me this 19 day of November 19 97

Notary Public [Signature]

Date Commission Expires _____
MICHAEL B. NIVEN
Barrister & Solicitor

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wipeline Log Received
C	<input checked="" type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SMD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/>		<input checked="" type="checkbox"/> Other (Specify) <u>IDG</u>

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SIDE TWO

Operator Name Buried Hills Production Company Lease Name Billings Well # 1 Hz
 Sec. 25 Twp. 22S Rge. 23 East County Hodgeman
 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:

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

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 Percent Additives
Surface Casing	12 1/4	9 5/8	36	540.7	Portland A	225	3% CaCl ₂
Intermediate	8 3/4	7"	23	4812	Mid Con II	500	3% CaCl ₂ 3/8# B B Flock
Liner	6 1/8	4 1/2	9.5	6856			

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	N/A			
<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
	Open Hole Completion		

TUBING RECORD Size Set At Packer At Liner Run Yes No
 Not Applicable - tubing not run

Date of First, Resumed Production, S/D or Inj. September 4, 1997 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 100 Bbls. Gas TSTM Mcf Water 1500 Bbls. Gas-Oil Ratio Gravity 370 API

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