

COPY

SIDE ONE

185-22,955

CONFIDENTIAL

Copy and

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

Operator: License # 09282

Name: General Atlantic Resources, Inc.

Address 410-17th Street, Suite 1400

City/State/Zip Denver, CO 80202

Purchaser: N/A

Operator Contact Person: Robert Mowry

Phone (303) 573-5100

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Richard Hall

Designate Type of Completion
 New Well Re-Entry Workover

Oil SUD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

04-09-94 04-15-94 4-15-94
Spud Date Date Reached TD Completion Date
plugged

API NO. 15- 185-22,955
County Stafford
SE - SE - SE - Sec. 7 Twp. 23 Rge. 11 ^E _W
600 Feet from (S) _N Line of Section
600 Feet from (E) _W Line of Section

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

Lease Name Fritzemeyer Well # 1

Field Name _____

Producing Formation None

Elevation: Ground 1824 KB 1832

Total Depth 3800 PBTB _____

Amount of Surface Pipe Set and Cemented at 420 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 D&A JZ 8-29-94
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hazardous **RELEASED**

Operator Name _____ JUN 2 8 1995

Lease Name _____ License No. _____

_____ Quarter Sec. FROM CONFIDENTIAL Twp. _____ Rng. _____ E/W

County _____ Docket No. _____

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 Robert D. Mowry
Senior Operations Eng. Date 4/25/94

Subscribed and sworn to before me this 4th day of May 19 94.

Notary Public Barbara J. Rickford
Date Commission Expires 2/9/95

BARBARA J. RICKFORD
410 17TH ST., STE. 1400
DENVER, CO 80202

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	Geologist Report Received
RECEIVED		
DISTRIBUTION		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input checked="" type="checkbox"/> Other
		(Specify)
MAY 19 1994		
CONSERVATION DIVISION Wichita, Kansas		

SIDE TWO

Operator Name General Atlantic Resources, Inc. Lease Name Fritzemeyer Well # 1
Sec. 7 Twp. 23 Rge. 11 East West
County Stafford

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 Datum Sample
Name Top Datum
Redbeds 820'
Kansas City 3547'
Arbuckle 3800'

List All E.Logs Run: DUAL INDUCTION
COMPENSATED NEUTRON
DIPMETER
BOREHOLE COMPENSATED ACOUSTIC
MINILOG

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"	25#	420'	60/40 poz	225	2% gel 3% cd.

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: ___ Perforate ___ Protect Casing ___ Plug Back TD ___ Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. D&A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil N/A Bbls. Gas N/A Mcf Water N/A 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 _____