

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

API NO. 15- 007-01050 0000

County Barber County, Kansas**ORIGINAL**C - NE - NE - Sec. 16 Twp. 31S Rge. 11 XX WOperator: License # Raymond Oil Company Inc.Name: Raymond Oil Company, Inc.Address P.O. Box 48788City/State/Zip Wichita, Kansas 67201-8788

Purchaser: _____

Operator Contact Person: Pat RaymondPhone (316) 267-4214Factor: Name: Duke Drilling Co., Inc.License: 5929Wellsite Geologist: Tim Hellman

Designate Type of Completion

____ New Well ____ Re-Entry ____ Workover

____ Oil ____ SWD ____ SLOW ____ Temp. Abd.

____ Gas ____ ENHR ____ SIGW

XX Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: Olson Oil CompanyWell Name: Axline #1Comp. Date 12-13-42 Old Total Depth 4512'

____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD

____ Plug Back ____ PBTD

____ Commingled ____ Docket No. _____

____ Dual Completion ____ Docket No. _____

____ Other (SWD or Inj?) ____ Docket No. _____

01-13-9701-14-974-1-97

Spud Date

Date Reached TD

Completion Date

____ 660 Feet from S/N (circle one) Line of Section

____ 660 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 Axline OWWO Well # 1Field Name Wildcat

Producing Formation _____

Elevation: Ground 1784' KB 1792'Total Depth 3968' PBTD 3976'Amount of Surface Pipe Set and Cemented at 156' 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

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

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

Title Wm. S. Raymond
PresidentDate 4-15-97Subscribed and sworn to before me this 15th day of April, 19 97.

Notary Public

Sharron A. HillDate Commission Expires July 28, 1999

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)