

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM  
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # ..... 4285 .....  
Name .. Craig/Stephenson Corp .....  
Address .. P.O. Box 2646 .....  
..... Ponca City, OK 74602 .....  
City/State/Zip .....

Purchaser.....  
.....

Operator Contact Person .. Jeff Wolfe .....  
Phone 405-762-9062.....

Contractor: License # .. 5380 .....  
Name .. Eagle Drilling Co .....  
.....

Wellsite Geologist... Jeff Wolfe .....  
Phone 405-765-8782.....

Designate Type of Completion

New Well     Re-Entry     Workover

Oil                     SWD                     Temp Abd  
 Gas                     Inj                     Delayed Comp.  
 Dry                     Other (Core, Water Supply etc.)

If OWWO: old well info as follows:  
Operator .....  
Well Name .....  
Comp. Date ..... Old Total Depth.....

WELL HISTORY

Drilling Method:  
 Mud Rotary     Air Rotary     Cable

10-14-85...    .. 10-18-85...    10-18-85.....  
Spud Date            Date Reached TD    Completion Date  
3900  
.....  
Total Depth            PBD

Amount of Surface Pipe Set and Cemented at 305 feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set.....feet  
if alternate 2 completion, cement circulated  
from.....0.....feet depth to 305.....w/. 220SX cmt

API NO. 15-.... 007-22,092.....

County..... Barber.....

..... NE.. Sec..6.. Twp..31..Rge..14...  East  
 West

4950..... Ft North from Southeast Corner of Section  
1600..... Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

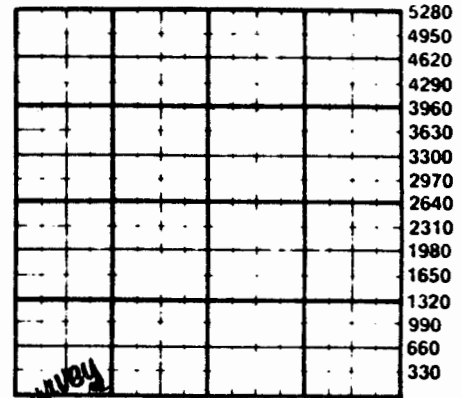
Lease Name..... Bibb ..... Well #..... 2.....

Field Name..... Mullberry.....

Producing Formation..... D & A.....

Elevation: Ground..... 1718 ..... KB..... 1731.....

Section Plat



FEB 17 1985

WATER SUPPLY INFORMATION

Position of Produced Water:  Disposal  
Docket # .....  Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:  
Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner  
(Well)            .....Ft West from Southeast Corner of  
Sec    Twp    Rge     East     West

Surface Water 4950 Ft North from Southeast Corner  
(Stream, pond etc) 1600 Ft West from Southeast Corner  
Sec 6    Twp 31    Rge 14     East     West

Other (explain).....  
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

SIDE TWO

Operator Name ..... Craig/Stephenson ..... Lease Name ..... Ribb ..... Well # ..... 2 .....

Sec. 6 ..... Twp. 31 ..... Rge. 14 .....  East  West County ..... Barber .....

WELL LOG

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  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No

Formation Description  
 Log  Sample

Name	Top	Bottom
Heebner	3685	3692
Toronto	3700	3728
Douglas	3736	3852
Douglas Sand	3852	3862
Lansing	3862	3900
RTD	3900	

CASING RECORD <input type="checkbox"/> New <input checked="" 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	12 3/4	8 5/8	20	305	Common	220	2% cc
.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....	.....	.....

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(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 Production	Producing Method
D & A	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....