

COPY *ml*

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

Operator: License # 32439

Name: Miller Energy, Inc.

Address 7900 Moorsbridge Road

City/State/Zip Portage, MI 49024

Purchaser: _____

Operator Contact Person: Mike Miller

Phone (616) 324-3390

Contractor: Name: Abercrombie RTD, Inc.

License: 30684

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

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

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

3-29-99 4-11-99 4-12-99
Spud Date Date Reached TD Completion Date

API NO. 15- 119-209980000

County Meade

180' S/2 - SE - SW - _____ Sec. 16 Twp. 31S Rge. 30 ^E _W

330' Feet from S/N (circle one) Line of Section

1800' 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 Zimmerman Well # 1-16

Field Name WC

Producing Formation NONE

Elevation: Ground 2760' est KB 2765' est

Total Depth 6000' PBTD _____

Amount of Surface Pipe Set and Cemented at 1662' 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 P+A 5-10-99 U.C.
(Data must be collected from the Reserve Pit)

Chloride content 27,000 ppm Fluid Volume _____

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: MAY 03 1999

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 03 1999
CONSERVATION DIVISION
WICHITA, KS

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 *Richard Miller*
Title President, Miller Energy, Inc Date _____
Subscribed and sworn to before me this 30th day of April, 1999.
Notary Public *April Davis, Kalamazoo Co., Michigan*
Date Commission Expires 1/24/2002

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution
 KCC SMD/Rep NSPA
 KGS Plug Other (Specify) IS

APRIL D. DAVIS
Notary Public, Kalamazoo County, MI
My Commission Expires Jan. 24, 2002

Y900 COPY

Operator Name Miller Energy, Inc.

SIDE TWO

Lease Name ZimmermanWell # 1-16Sec. 16 Twp. 31S Rge. 30 EastCounty Meade 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:

 CNL/Den 0 - 6,000'
 DIL/ML/Sonic 1,660-6,000'

 Log Formation (Top), Depth and Datums Sample

Name Top Datum

See Attached Sheet

 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"	24#	1662'	Lite	525	3% cc
					Class A	150	3% cc

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	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, SLD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
<u>P&A</u>	

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>N-A</u>				

Disposition of Gas: **METHOD OF COMPLETION**
 Vented Sold Used on Lease
 (If vented, submit ACO-18.)

 Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____
Production Interval

