

3-325-12W

COPY

Paul

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

API NO. 15- 007-22498 0000
County: Barber

C - NW - SW - Sec. 3 Twp. 32S Rge. 12 W

1980 Feet from SN (circle one) Line of Section
660 Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW, SW (circle one)

Operator: License # 5428
Name: Graves Drilling Co., Inc.
Address: P.O. Box 8250

Lease Name: Wheelock Well #: 1
Field Name: Whelan SW

City/State/Zip: Wichita, KS 67208-0250
Purchaser: Koch Oil Company/KGS

Producing Fromation: Mississippian
Elevation: Ground 1474 ft KB 1485 ft
Total Depth: 4350 ft PBDT

Operator Contact Person: Fredrick W. Stump
Phone: (316) 687-2777

Amount of Surface Pipe Set and Cemented at: 428 ft
Multiple Stage Cementing Collar Used? Yes x No

Contractor Name: Duke Drilling Co., Inc.
License #: 5929

If yes, show depth set: _____ ft
If Alternate II Completion, cement circulated from: _____
feet depth to _____ w/ _____ sx cmt.

Wellsite Geologist: Arden Ratzlaff

Designate Type of Completion
 New Well Re-Entry Workover Temp. Abd.
 Oil SWD SIOW
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc.)

Drilling Fluid Management Plan ALT 1 8/4 10-17-96
(Data must be collected from the Reserve Pit)

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

Chloride content 5300 ppm Fluid Volume 800 bbls
Dewatering method used Hauled

Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

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

Location of fluid disposal if hauled offsite:

03-28-96 04-03-96 04-04-96
Spud Date Date Reached TD Completion Date

Operator Name: Graves Drilling Co., Inc.

Lease Name: Jacobs #1

NE/4 Quarter Sec. 13 Twp. 32S Rge. 12 W

County Barber Docket No. CD-11809
(C-20,013)

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market, Rm 2078, Wichita, KS 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.

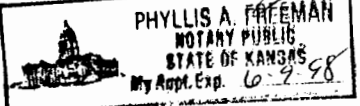
Signature: Fredrick W. Stump
Title: Geologist

MAY 20 1996
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)

Subs 1 and sworn to before me this 17th day of May, 1996.

June 9, 1998
Dt Commission Expires Phyllis A. Freeman, Notary Public



W 21 325 0

Side Two

Operator Name: Graves Drilling Co., Inc.
Sec. 3 Twp. 32S Rge. 12 W

Lease Name: Wheelock Well #: 1
Barber

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stems 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: Gamma Ray Neutron- Density - Sonic - Induction

| | | |
|---|-----------------------------------|---------------------------------|
| <input checked="" type="checkbox"/> Log | Formation (Top), Depth and Datums | <input type="checkbox"/> Sample |
| Name | Top | Datum |
| Heebner | 3509 | -2024 |
| Lansing | 3681 | -2196 |
| Stark | 4051 | -2742 |
| Mississippi | 4227 | -2742 |

| 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 | 12-1/4" | 8-5/8" | New 23# | 428' | 60/40 Poz | 250 | 3% cc, 2% gel |
| Production | 7-7/8" | 5-1/2" | Used 15.50# | 4347' | 50/50 Poz | 125 | 10% salt, 5% gel 2% HALAD-322 |

| ADDITIONAL CEMENTING/ SQUEEZE RECORD | | | | | |
|---|-----------|--------------|---------------|--------------|----------------------------|
| Purpose: | Depth Top | Depth Bottom | Type of Cemer | # 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 |
|----------------|---|---|-------|
| 2 | Perf: 4222 - 4234 | Az w/500 gal. retarded 50% FE Frac 15000#/100; 40000# 20/40; 60000# 12/20, w/1458 bbls wtr. | |

| TUBING RECORD | | | | LINER RUN | | | |
|--|----------------|------------------|------------------------------|--|---|-----------------------------------|--------------------------|
| SIZE | SET AT | PACKER AT | | | | | |
| 2-3/8" | 4256' | None | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No | | | |
| Date of First, Resumed Production, SWD or Inj. April 18, 1996 | | | | Producing Method | | | |
| | | | | <input type="checkbox"/> Flowing | <input checked="" type="checkbox"/> Pumping | <input type="checkbox"/> Gas Lift | <input type="checkbox"/> |
| Estimated Production Per 24 Hours | Oil Bbls 25 | Gas MCF 50000 | Water Bbls 10 | Gas - Oil Ratio 2000-1 | | Gravity 31 degrees | |

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 4222-4234