

and

6071

SIDE ONE

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

Operator: License # 5428

Name: Graves Drilling Co., Inc.

Address P.O. Box 8250

City/State/Zip Wichita, KS 67208

Purchaser: Koch Oil Co.

Operator Contact Person: Fred Stump

Phone (316) 687-277

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Fredrick W. Stump

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

CONSERVATION DIVISION
Wichita, Kansas

OCT 30 1990

If **OWWO**: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

09-20-90 09-26-90 10-10-90
Spud Date Date Reached TD Completion Date

API NO. 15- 007-22,330

County Barber

SW SE SE Sec. 29 Twp. 32 Rge. 12 East West

330 Ft. North from Southeast Corner of Section

990 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

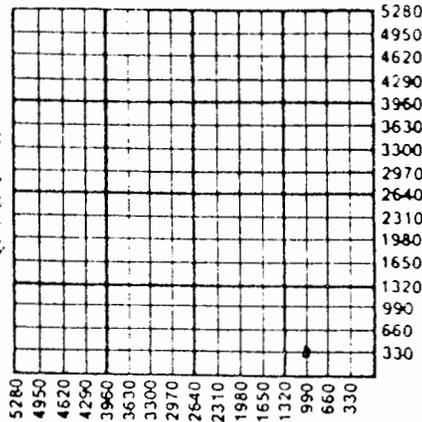
Lease Name Thomas-Forsyth Well # 16

Field Name Medicine Lodge North

Producing Formation Mississippian

Elevation: Ground 1640 KB 1649

Total Depth 4560' PBD _____



ACQ-1

Amount of Surface Pipe Set and Cemented at 229 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.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Date 10-22-90

Subscribed and sworn to before me this 22nd day of October, 19 90.

Notary Public Phyllis A. Freeman
Phyllis A. Freeman

Notary Commission Expires June 9, 1994
PHYLIS A. FREEMAN
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 6-9-94

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other (Specify) I-5.

COPY

SIDE TWO

Operator Name Graves Drilling Co., Inc. Lease Name Thomas-Forsyth Well # 16
 Sec. 29 Twp. 32 Rge. 13 East County Barber
 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation Description
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
		<input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample
		Name Top Bottom
		Elgin 3562
		Heebner 3743
		Syderville Snd 3762
		Douglas Sand 3878
		Lansing 3922
		Stark 4308
		Mississippian 4466
		TD 4564

CASING RECORD							
<input checked="" 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"	20#	229'	60/40poz	185	2% gel 3% cc.
Production	7-7/8"	5 1/2"	14#	4559'	Surefill	100	300 gal mud swee.
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)			Depth
2	4474-4506			1700 gal. 15% ASFE Acid			
				Frac w/30,000# 100 mesh			
				56,000# 20-40 sd			
				78,000# 12-20 sd			
				& 2000 bbl gelled water			
TUBING RECORD				Liner Run			
Size	Set At	Packer At	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
2 3/8	4470	none					
Date of First Production	Producing Method						
10-10-90	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)						
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio		Gravity	
	15	5000	10	1/333 CFG			

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

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____