

COPY *and*

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

API NO. 15- 025-21209-0000

County Clark

NE - NW - SE - NE Sec. 29 Twp. 32S Rge. 22 E/W

Operator: License # 32640

Name: R.E. Blaik, Inc.

Address P. O. Box 1375

City/State/Zip Okla. City, OK 73101

Purchaser: Kiowa Gas Company

Operator Contact Person: Todd Moore

Phone (214) 368-6700

Contractor: Name: Big A Drilling Co.

License: _____

Wellsite Geologist: Mike Smith

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 _____ PBD
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) _____ Docket No. _____

7-06-00 7-20-00 3-5-01
Spud Date Date Reached TD Completion Date

1840 Feet from S (circle one) Line of Section

800 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 Frances Well # 1-29

Field Name Blaricum

Producing Formation Lansing

Elevation: Ground 2070' 2088' KB 2099'

Total Depth 6800' PBD 4577'

Amount of Surface Pipe Set and Cemented at 834 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 All 1 GOR 2-19-03
(Data must be collected from the Reserve Pit)

Chloride content 2500 ppm Fluid volume 2000 bbls

Deaerating method used evaporation

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 President Date 3/21/01

Subscribed and sworn to before me this 21st day of March, 2001.

Notary Public Norma Nell Clark

Date Commission Expires 6/30/2004

K.C.C. OFFICE USE ONLY			
F	<u>No</u>	Letter of Confidentiality Attached	
C	<u>Yes</u>	Wireline Log Received	
C	<u>No</u>	Geologist Report Received	
Distribution			
<input type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep	<input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other
(Specify)			

Operator Name R.E. Blaik, Inc. Lease Name Frances Well # 1-29

Sec. 29 Twp. 32 Rge. 22
 East
 West

County Clark

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:
 Array Induction/Neutron-Density/
 Micro

<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample		
Name	Top	Datum
Hutchinson Salt	1765	2099
Lansing	4457	"
Swope	4908	"
Marmaton	5012	"
Cherokee	5150	"
Mississippi	5307	"
Viola	6500	"
Arbuckle	6740	"

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
Conductor	-	20"	-	61'	grout	-	-
Surface	12-1/4"	8-5/8"	24	834'	Pos/A	415	3% cc
Production	7-7/8"	4-1/2"	10.50	4636'	Class A	125	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	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4	4516-18'	500 gal. 15% NeFe HCL	4516-18'

TUBING RECORD		Size	Set At	Packer At	Liner Run			
		2-3/8"	4500'	4500'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or Inj.		Producing Method						
WOPL		<input checked="" type="checkbox"/> Flowing <input 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
		0		250		100	250,000:1	73

Disposition of Gas: **METHOD OF COMPLETION** **Production Interval**

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

(If vented, submit ACO-18.) Other (Specify) _____