

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

Operator: License # 5278

Name: Enron Oil & Gas Company

Address 20 N. Broadway, Suite 830

City/State/Zip Oklahoma City, OK 73102

Purchaser: Tenaska Marketing Ventures and
Boyd Rosene and Associates, Inc.

Operator Contact Person: Roy Porter

Phone (405) 239-7800

Contractor: Name: Allen Drilling Company

License: 5418

CONFIDENTIAL

Wellsite Geologist: Glen Brown

Designate Type of Completion

New Well Re-Entry Workover

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

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

STATE CORPORATION COMMISSION

Operator: RELEASED

Well Name: FFB 02 1995

Comp. Date: 11 1997

Old Total Depth: 10000

Completion: CONFIDENTIAL

Deepening: CONFIDENTIAL RE-perf. Conv/Int'l Inj/SWD

Plug/Back: CONFIDENTIAL PBD

Commingled

Docket No.

Dual Completion

Docket No.

Other (SWD or Inj?)

Docket No.

12-21-94

1-6-95

1-26-95

Spud Date

Date Reached TD

Completion Date

API NO. 15- 119-20940 15-32S-264

County Meade

NE SW NW SE sec. 15 Twp. 32S Rge. 26 E W

1750 Feet N/S (circle one) of Section Line

2000 Feet E/W (circle one) of Section Line

Footages Calculated from Nearest Outside Section Corners:
NE, SE, NW or SW (circle one)

Lease Name Lauppe Well # 15-1

Field Name Razorhawk

Producing Formation Mississippian

Elevation: Ground 2406' KB 2416'

Total Depth 5650' PBD 5570'

Amount of Surface Pipe Set and Cemented at 1031 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/ _____ x cmt.

Drilling Fluid Management Plan ALT 1 8/27/95
(Data must be collected from the Reserve Pit)

Chloride content 7900 ppm Fluid volume 910 bbls

Dewatering method used Haul off

Location of fluid disposal if hauled offsite:

Operator Name DillCo Fluid Service, Inc.

Lease Name Regier SWD #1 License No. 06652

NE Quarter Sec. 17 Twp. 33 S Rng. 27 E W

CD-9824 Docket No. C21,232

County Meade

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Jerry Foster

Title Sr. Engr. Sec. Date 2-6-95

Subscribed and sworn to before me this 6th day of February, 19 95.

Notary Public Condy B. Jackson

Commission Expires 2/10/98 NUC

<input checked="" type="checkbox"/> F	K.C.C. OFFICE USE ONLY	
<input checked="" type="checkbox"/> C	Letter of Confidentiality Attached	
<input checked="" type="checkbox"/> C	Wireline Log Received	
<input checked="" type="checkbox"/> C	Geologist Report Received	
Distribution		
<input checked="" type="checkbox"/> KCC	<input type="checkbox"/> SWD/Rep	<input type="checkbox"/> NGPA
<input checked="" type="checkbox"/> KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other (Specify) <u>TS</u>

FEB 8

Form ACO-1 (7-91)

CONFIDENTIAL

Sec. 15 Twp. 32S Rge. 26 East
 West

Meade County _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests given 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Chase	2650	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Penn	3620	
List All E.Logs Run: Array Induction, Compensated Neutron, Micro, Cement Bond		Heebner	4373	
		Lansing	4554	
		Altamont	5146	
		Pawnee	5220	
		Ft. Scott	5234	
		Cherokee	5254	
		Chester	5470	
		St. Gen	5616	

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#	1031'	Lite	275	6% gel, 3% CC, 1/2# Floseal
				5650'	Class "A"	150	3% CC
Production	7-7/8"	4-1/2"	10.5 & 11.6	5650'	50/50 POZH Class "H"	75	4% gel, 5% salt, 5% CF-4, 1% WR-10, 2# SX

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Perforate	Top			
Protect Casing	Bottom			
Plug Back TD				
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
4	5470-5472'; 5474-5495'	432 bbls 15% HCl acid,	5482'
		447 bbls 2% KCl + 35# Guar	
		Pad	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8"	5465'	None		

Date of First, Resumed Production, SWD or Inj.	Producing Method	<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
1-27-95		

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	1	1677	1	1,677,000	

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	5470-5495'
	<input type="checkbox"/> Other (Specify) _____	