

1-32-31W
CONFIDENTIAL

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

API NO. 15- 175-21299

County Seward

NW - NE - Sec. 1 Twp. 32S Rge. 31W

4845 Feet from S (circle one) Line of Section

2205 Feet from E (circle one) Line of Section

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

Lease Name Saunders Well # 1-1

Field Name Plains

Producing Formation Morrow

Elevation: Ground 2779* 2780 KB 2791

Total Depth 6055' PBD 6020'

Amount of Surface Pipe Set and Cemented at 1710' @1721' Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name RELEASED

Lease Name _____ License No. _____

Quarter Sec. NOV 2 1 1994 Twp. 32S Rng. 31W

County FROM CONFIDENTIAL

COPY

TIGHT HOLE

CONFIDENTIAL

Operator: License # 5652

Name: Mustang Oil & Gas Corporation

Address 100 S. Main, Suite 300

City/State/Zip Wichita, KS 67202

Purchaser: _____

Operator Contact Person: Wayne L. Brinegar

Phone (316) 267-8011

Contractor: Name: Murfin Drilling Company

License: 30606 KCC

Wellsite Geologist: Bob Douglas

Designate Type of Completion

X New Well _____ Re-Entry _____

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

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

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. _____

6-23-93 7-6-93 7-25-93*

Spud Date Date Reached TD Completion Date

*SI pending market and pipeline ROW

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 Wayne L. Brinegar Wayne L. Brinegar

Title Exploitation/Production Manager Date 10-19-93

Subscribed and sworn to before me this 19th day of October 19 93.

Notary Public

PATRICIA A. REILLEY
NOTARY PUBLIC
STATE OF KANSAS

August 11, 1995

My Appt. Exp. 8-11-95

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
RECEIVED
STATE CORPORATION COMMISSION
KCC SVD/Rep NSPA
KGS _____ Other (Specify)
OCT 20 1993
CONSERVATION DIVISION
Wichita, Kansas
Form ACO-1 (7-91)

Operator Name Mustang Oil & Gas Corporation Lease Name Saunders Well # 1-1

Sec. 1 Twp. 32S Rge. 31 East County Seward

West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem test - ving 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	Winfield	2764'	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Council Grove	3009'	
List All E.Logs Run:		Wabaunsee	3534'	
AC-GR-CAL; DIFL-GR; ZDL-CN-GR-ML;		Heebner	4292'	
Minilog-GR; Caliper Plot		Lansing	4404'	
		Mamaton	4973'	
		Cherokee	5200'	
		Morrow Sd	5498'	
		Chester	5568'	
		Ste. Genevieve	5745'	
		St. Louis	5830'	

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 1/2"	8-5/8"	24#	1721'	Prem Plus HLC	700	2%CC, 1/4% local
Production	7-7/8"	5 1/2"	15.5#	6054'	Class C	260	7 1/2% EA-2, 2%CC, 15% salt, 5# Gilsnik, 8/4% Halad 9, 1/4% as

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 To				
<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
3	5500-04'	400 gals 7 1/2% HCL w/I-10D, LT-25, LT-21, liquid citric acie, AC-2 & Clay-Master	
		90 bbls 70 Quality Binary Foam	

TUBING RECORD	Size <u>2-3/8"</u>	Set At <u>5475'</u>	Packer At <u>5437'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. <u>7-29-93*</u>	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. <u>0</u>	Gas Mcf <u>1,025</u>	Water Bbls. <u>0</u>	Gas-Oil Ratio <u>6:1</u>
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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: Morrow

*SI pending market and pipeline ROW