

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

Operator: License # 06230

Name: First National Oil, Inc.

Address 23 E. 11th Street

City/State/Zip Liberal, Kansas 67901

Purchaser: Panhandle Trading

Operator Contact Person: Bill Carlisle

Phone (316) 624-1664

Contractor: Name: Bruce Well Service

License: _____

Wellsite Geologist: _____

Designate Type of Completion _____

New Well Re-Entry Workover

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

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

Operator: Shepler & Thomas

Well Name: Wettstein #1-33

Comp. Date 4-29-90 Old Total Depth 6040'

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

2-15-92 2-18-92 3-12-92
Spud Date Date Reached TD Completion Date

API NO. 15- 15-175-21138 0001 9nd
County Seward 33-32-32W

C W/2 NE Sec. 33 Twp. 32S Rge. 32 X U

3960 Feet from S/N (circle one) Line of Section
1980 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 Wettstein Well # 1-33

Field Name Hugoton

Producing Formation Chase Group

Elevation: Ground 2818' KS 2820'

Total Depth 6040' PSTD 2704'

Amount of Surface Pipe Set and Cemented at 1635 KB 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/ _____ SK out.

Drilling Fluid Management Plan 4-9-93
(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 _____

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, 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.

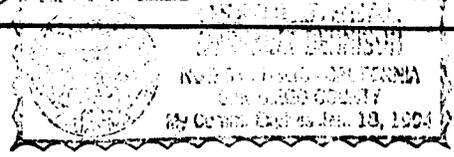
Signature _____

Title President Date 3-12-93

Subscribed and sworn to before me this 12th day of March, 19 93.

Notary Public Margaret Dennis

Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
RECEIVED
STATE CORPORATION COMMISSION
DISTRIBUTION
 KCC SWD Plug Other
 KGS
MAR 19 1993
CONSERVATION DIVISION
WICHITA, KANSAS

33 Top 325 App 32
 [] East
 [] 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 Yes No
 (Attach Additional Sheets.)

Sample Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

List All E.Logs Run:

Log Formation (Top), Depth and Bottom Sample
 Name Top Bottom

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
PRIOR OPERATOR							
Report all strings not-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

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	2754-56'		20	Class C 2% CaCl w/celloflake
<input checked="" type="checkbox"/> Plug Back TD				
<input checked="" type="checkbox"/> Plug Off Zone	2716-24'		50	Class C 2% CaCl w/celloflake

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	2716-24'	100 sks Class H 2% CC w/celloflake
4	2580'	15 bbls Class H 2% CC w/celloflake
4	2686-96'	
4	2666-76'	

TUBING RECORD	Size	Set At	Pecker At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, BWD or Inj.	Producing Method <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
		188	16	

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Cemented Other (Specify) _____

Production Interval _____