

FORM MUST BE

ORIGINAL

SIDE ONE

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- 007-10315

County Barber

C NW Sec. 21 Twp. 33S Rge. 13 X E/W

1320 Feet from S/W (circle one) Line of Section

3960 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 McKee Well # 5

Field Name Medicine Lodge

Producing Formation _____

Elevation: Ground 1704 ft KB N/A

Total Depth 4694 ft PBDT 4400 ft

Amount of Surface Pipe Set and Cemented at 286 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 N/A Steel pit used for fluids, earth pit

Location of fluid disposal if hauled offsite:

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

Operator: License # 3273

Name: Herman L. Loeb

Address P. O. Box 524

City/State/Zip Lawrenceville, IL 62409

Purchaser: _____

Operator Contact Person: George A. Payne

Phone (812) 853-3813

Contractor: Name: Clarke Corporation

License: 5105

Wellsite Geologist: N/A Re-entry of cased hole.

Designate Type of Completion
New Well _____ Re-Entry X Workover _____

Oil _____ S/W _____ S/O/W X 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/S/W

Plug Back _____ PBDT _____

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (S/W or Inj?) _____ Docket No. _____

Spud Date _____ Date Reached TD _____ Completion Date _____

RECEIVED
MAR - 1 1999
STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
Wichita, Kansas

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 George A. Payne

Title Petroleum Engineer Date Feb. 22, 1999

Subscribed and sworn to before me this 22 day of FEBRUARY, 19 99.

Notary Public Donna Carlene Lucas

Date Commission Expires 4-6-02

| K.C.C. OFFICE USE ONLY | | |
|-------------------------------------|------------------------------------|------------------------------------------|
| F | Letter of Confidentiality Attached | |
| C | Wireline Log Received | |
| C | Geologist Report Received | |
| Distribution | | |
| <input checked="" type="checkbox"/> | KCC | <input type="checkbox"/> S/W/Rep |
| <input type="checkbox"/> | KGS | <input type="checkbox"/> Plug |
| <input checked="" type="checkbox"/> | MGPA | <input type="checkbox"/> Other (Specify) |

Form ACO-1 (7-91)

OFFICIAL SEAL
DONNA CARLENE LUCAS
Notary Public, State of Illinois
My Commission Expires: 4/6/02