

COPY *and*

2528

SIDE ONE

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

Operator: License # 5011

Name: Viking Resources, Inc.

Address 105 S. Broadway, Suite #1040

City/State/Zip Wichita, KS 67202-4224

Purchaser: Unknown

Operator Contact Person: James B. Devlin

Phone (316) 262-2502

Contractor: Name: White & Ellis Drilling, Inc.

License: 5420

Wellsite Geologist: Robert C. Patton

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

OWMO: old well info as follows:

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

12-6-90 12-18-90 1-16-91

Spud Date Date Reached TD Completion Date

API NO. 15- 077-21,220

County Harper

NW SE SW Sec. 5 Twp. 33s Rge. 6 East West

1000' Ft. North from Southeast Corner of Section

3830' Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

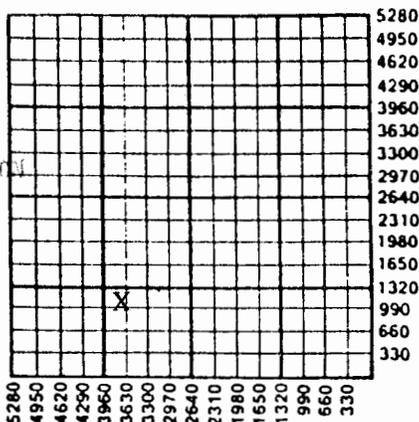
Lease Name Williams Well # 1-5

Field Name Wildcat

Producing Formation Mississippian

Elevation: Ground 1327 KB 1338

Total Depth 5100' PBTD 4660



Amount of Surface Pipe Set and Cemented at 261 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.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 James B. Devlin

Title President Date 1-31-91

Subscribed and sworn to before me this 31st day of January, 19 91.

Notary Public Shawn P. Devlin
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 12-3-94

Shawn P. Devlin
December 3, 1994

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received

Distribution

KCC SWD/Rep NGPA
 KGS Plug Other (Specify) IS

SIDE TWO

Operator Name Viking Resources, Inc. Lease Name Williams Well # 1-5
 Sec. 5 Twp. 33s Rge. 6 East County Harper
 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 (Attach Additional Sheets.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td>3199</td> <td></td> </tr> <tr> <td>Stark</td> <td>3946</td> <td></td> </tr> <tr> <td>Miss</td> <td>4411</td> <td></td> </tr> <tr> <td>Arbuckle</td> <td>4843</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Heebner	3199		Stark	3946		Miss	4411		Arbuckle	4843	
Name	Top	Bottom														
Heebner	3199															
Stark	3946															
Miss	4411															
Arbuckle	4843															

DST-See Attachment

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 1/4"	8 5/8"	20#	261'	60/40 poz mix	165	3%cc 2%gel
Production	7 7/8"	4 1/2"	10.5#	4675'	ASC	150	10bbl mud flush 5% gilsonite 3# cemas
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			Amount and Kind of Material Used		Depth	
4	4420'-4425'			12 Bbl 15% MCA Acid		4420-25'	
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size	Set At	Packer At					
2 3/8"	4473'	None					
Date of First Production	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)						
1-16-91							
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	0	3300	Trace				

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

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____