

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

API NO. 15- 007-22586 0000

County Barber County, Kansas

30° N C N/2 . N/2 . SW Sec. 13 Twp. 34 Rge. 14 X W

Operator: License # 3532 **ORIGINAL**

Name: CMX, Inc.

Address 150 N. Main - Suite 1026

City/State/Zip Wichita, Kansas 67202

Purchaser: KGS

Operator Contact Person: Douglas McGinness II

Phone (316) 269-9052

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Doug McGinness

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SLOW 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/SWD
 Plug Back PBSD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

09-23-98 10-04-98 10-05-98
Spud Date Date Reached TD Completion Date

2340 Feet from S/N (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 Bouziden Well # 2

Field Name Aetna Gas Area

Producing Formation Toronto Doug

Elevation: Ground 1636 KB 1648

Total Depth 5270' PBSD 5300'

Amount of Surface Pipe Set and Cemented at 329 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.

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

Chloride content _____ ppm Fluid volume 160 bbls

Dewatering method used Hauled off

Location of fluid disposal if hauled offsite:

Operator Name Oil Producers of Kansas

Lease Name Watson License No. 1

SW/4 Quarter Sec. 8 Twp. 29S S Rng. 15W E/W

County Pratt Docket No. D-24324

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 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 [Signature]

Title President Date 2/12/99

Subscribed and sworn to before me this 12 day of February, 19 99.

Notary Public [Signature]

Date Commission Expires 2/7/2000

DONNA L. MAY
Notary Public - State of Kansas
My Appt. Expires 2/7/2000

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
IS (Specify)

Operator Name CMX, Inc. Lease Name Bouziden Well # 2
 Sec. 13 Twp. 34 Rge. 14 County Barber County, Kansas
 East West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all zones. 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	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Kanwaka Shale	3730	-2085
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Oread Lst	3904	-2259
List All E.Logs Run:		Heebner Sh	3937	-2292
Log-Tech		Synderville Zn	3949	-2304
DIL		Totonto Lst	3959	-2314
CND		Upper Dg. Lst	3978	-2333
		Douglas Sh	4020	-2375
		Lansing	4116	-2473
		B/KC	4597	-2952
		TD	5270	-3625

CASING RECORD <input 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"	23#	329'	60/40 Poz	225	3%cc 2%cc
Production	7-7/8"	4-1/2"	10.5#	4156'	MidconII EA2	180 100	

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 TD				
<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
2	3998-4004	250 gal 15% followed by 20,000 lbs 20/40	
2	3979-3990	swd & 17,000 gallons Deltra fluid, frac	ob.

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>3970</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
1/16/99				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio
		COF 734 MCF	15	

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: Other (Specify) _____