

COPY *and*

FORM MUST BE TYPED

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 # 5506

Name: WOOLSEY PETROLEUM CORPORATION

Address: 107 NORTH MARKET

SUITE 600

City/State/Zip: WICHITA, KANSAS 67202-1807

Purchaser: N/A

Operator Contact Person: DEBRA K. CLINGAN

Phone: (316) 267-4379

Contractor: Name: DUKE DRILLING CO., INC.

License: 5929

Wellsite Geologist: MIKEAL K. MAUNE

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: N/A

Well Name: _____

Comp. Date: _____ Old Total Depth: _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

08/26/1996 08/27/1996 01/31/1997 P&A
Spud Date Date Reached TD Completion Date

API NO. 15- 007-22520

County BARBER

119' ESE-of NE-SW-NE Sec. 28 Twp. 34S Rge. 15 XX ^EW

1680' FNL Feet from S(N) (circle one) Line of Section

1535' FEL 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 BALLET RANCH Well # 1 TWIN

Field Name AETNA

Producing Formation N/A

Elevation: Ground 1555' KB 1566'

Total Depth 5550' RTD PBTD _____

Amount of Surface Pipe Set and Cemented at 853' 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 SEA ALT 15-1398 SK

(Data must be collected from the Reserve Pit)

NOTE: USED SAME PITS AS BALLET RANCH 1 (LOST CIRC)

SEE BALLET RANCH 1 API# 15-007-22514 0000

Chloride content 6000 ppm Fluid volume 1700 bbls

Dewatering method used HAUL FLUIDS TO SWD, DEHYDRATE, BACKFILL

Location of fluid disposal if hauled offsite: _____

Operator Name MOLZ OIL COMPANY

Lease Name MOLZ SWD License No. 6006

_____ Quarter Sec. 29 Twp. 32 S Rng. 10 E/W

County BARBER Docket No. CD 11804

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 Mark P. Stevenson

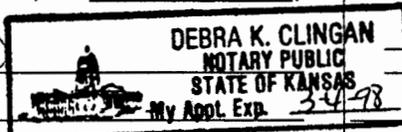
Title: MARK P. STEVENSON, V.P. OPERATIONS Date: 01/31/1997

Subscribed and sworn to before me this 31ST day of JANUARY, 19 97.

Notary Public Debra K. Clingan

DEBRA K. CLINGAN

Date Commission Expires: MARCH 4, 1998



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
19 (Specify)

COPY

SIDE TWO

Operator Name: WOOLSEY PETROLEUM CORPORATIONLease Name BALLET RANCHWell # 1 TWINSec. 28 Twp. 34 Rge. 15 EastCounty BARBER 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.)

 Samples Sent to Geological Survey Yes No

 Cores Taken Yes No

 Electric Log Run Yes No
 (Submit Copy.)

 List All E.Logs Run: ARRAY SONIC GAMMA RAY
DUAL INDUCTION - SFL GAMMA RAY
COMPENSATED NEUTRON LITHO-DENSITY GAMMA RAY
NATURAL GAMMA RAY SPECTROMETRY
TRACERSCAN ANALYSIS
CEMENT BOND LOG
 Log Formation (Top), Depth and Datums Sample

Name	Top	Datum
KRIDER	2116 (- 550)	
HEEBNER	3936 (-2370)	
LANSING G	4411 (-2845)	
HERTHA	4560 (-2994)	
MISSISSIPPIAN	4770 (-3204)	
VIOLA	5170 (-3316)	
ARBUCKLE	5498 (-3568)	
RTD	5545 (-3984)	

CASING RECORD

 New 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
CONDUCTOR	17-1/2"	13-3/8"	48#	207'	CLASS A	225	2% GEL, 3% CC
SURFACE	12-1/4"	8-5/8"	28#	853'	60/40 POZ	250	2% GEL, 3% CC

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

 TUBING RECORD N/A Size Set At Packer At Liner Run Yes No

 Date of First, Resumed Production, SWD or Inj. N/A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: METHOD OF COMPLETION

Production Interval

 Vented Sold Used on Lease
 (If vented, submit ACO-18.)

 Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____