

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

Operator: License # 3988Name: Slawson Exploration Co., Inc.Address 20 N. Broadway, Suite 700Oklahoma City, OK 73102

City/State/Zip _____

Purchaser: UnknownOperator Contact Person: Steve SlawsonPhone (800) 333-5493Contractor: Name: Triad DrillingLicense: 07345Wellsite Geologist: John Hedrick

Designate Type of Completion

 New Well Re-Entry Workover Oil SWD Temp. Abd. Gas Inj Delayed Comp. Dry Other (Core, Water Supply, etc.)

If OWWO: old well info as follows:

Operator: _____

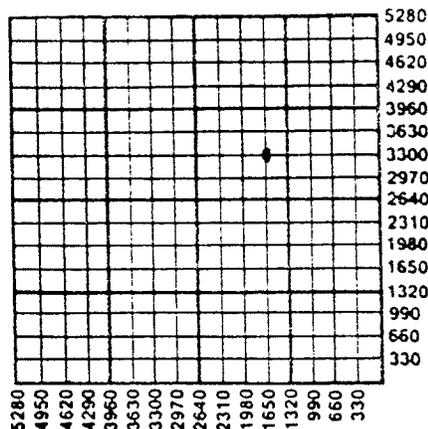
Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

 Mud Rotary Air Rotary Cable7-13-90 7-24-90 9-5-90Spud Date 7-13-90 Date Reached TD 7-24-90 Completion Date 9-5-90API NO. 15- 175-21,144County SewardE/2 SW NE Sec. 14 Twp. 34S Rge. 34 East West3300 Ft. North from Southeast Corner of Section1650 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name Stephens Well # 1-14Field Name N/AProducing Formation ChesterElevation: Ground 2900' KB 2914'Total Depth 6600' PBTD 6300'Amount of Surface Pipe Set and Cemented at 1658 FeetMultiple Stage Cementing Collar Used? Yes NoIf yes, show depth set 2882 Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ SX amt.

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 [Signature]Title Division Engineer Date 10/26/90Subscribed and sworn to before me this 26 day of October90.Notary Public Mia A. JohnstonDate Commission Expires September 13, 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) TS

Operator Name Slawson Exploration Co., Inc. Lease Name Stephens Well # 1-14
 Sec. 14 Twp. 34S Rge. 34 East County Seward Co., Kansas
 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	Formation Description <input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Bottom</th> </tr> </thead> <tbody> <tr> <td>Toronto</td> <td>4323</td> <td>-1409</td> </tr> <tr> <td>Lansing</td> <td>4453</td> <td>-1539</td> </tr> <tr> <td>Morrow Shale</td> <td>5781</td> <td>-2867</td> </tr> <tr> <td>Chester</td> <td>6080</td> <td>-3166</td> </tr> <tr> <td>St. Genevieve</td> <td>6409</td> <td>-3495</td> </tr> </tbody> </table>	Name	Top	Bottom	Toronto	4323	-1409	Lansing	4453	-1539	Morrow Shale	5781	-2867	Chester	6080	-3166	St. Genevieve	6409	-3495
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St. Genevieve	6409	-3495																		
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																			

DST #1 6483-6506', 30/60/60/120 min intervals. IFP 32-32#, FFP 32-32#, ISIP 1008#, FSIP 1265#, IHP & FHP 3060#. Rec 30' mud w/trace oil.

CASING RECORD <input type="checkbox"/> New <input checked="" 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	24	1653	Prem Lite	565	w/1/4# flocele 2%
DV Tool				2882	Class C	150	w/2% CC
Prod	7-7/8	4-1/2	11.6 10.5	6595	Premium	275	w/3% KCl, 0.4 Halad 322
					Scavenger	25	w/5% KCl 4% Halad 322
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			
Shots Per Foot	Specify Footage of Each Interval Perforated						
2	6493-6500' St. Louis			1000 gals 15% MCA acid			6493-6500'
	CIBP						6300'
2	6135-6148' Chester			1500 gals 15% FeHCl acid			6135-6148'
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	Size	Set At	Packer At				
	2-3/8	6046'	6046'				
Date of First Production WOPL		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		
	0	1100	29	---	---		

Disposition of Gas: Vented Sold Used on Lease Open Hole Perforation Dually Completed Commingled
 (If vented, submit ACO-18.) Other (Specify) _____

Production Interval