

CONFIDENTIAL

COPY *md*

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: KPL / TEXACO TRADING & TRANSPORTATION, INC.
Operator Contact Person: DEBRA K. CLINGAN
Phone: (316) 267-4379
Contractor: Name: DUKE DRILLING CO., INC.
License: 5929

RELEASED

JAN 29 1999

Wellsite Geologist: WESLEY D. HANSEN
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. PBTB
 Plug Back Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
08/05/1996 08/22/1996 10/16/1996
Spud Date Date Reached TD Completion Date

RECEIVED

KANSAS CORPORATION COMMISSION

DEC 03 1998

CONSERVATION DIVISION
WICHITA, KS

API NO. 15- 007-22513 0000
County BARBER
- C - SE - NW Sec. 3 Twp. 35 S Rge. 13 W E
1980' FNL Feet from S (circle one) Line of Section
1980' FWL Feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name MEYER E Well # 1
Field Name AETNA
Producing Formation MISSISSIPPIAN
Elevation: Ground 1553' KB 1564'
Total Depth 5652' RTD PBTB 5597'
Amount of Surface Pipe Set and Cemented at 203' 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 ALT 1 9X 4-7-97
(Data must be collected from the Reserve Pit)
Chloride content 22,000 ppm Fluid volume 1880 bbls
Dewatering method used HAUL FREE FLUIDS TO SWD. LET DEHYDRATE
Location of fluid disposal if hauled offsite: KLL
Operator Name MOLZ OIL & GAS COMPANY
Lease Name MOLZ SWDW License No. 176009
29 Quarter Sec. 32 Twp. 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: 12/03/1996
Subscribed and sworn to before me this 3rd day of DECEMBER, 1996.
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
(Specify) 15

DEBRA K. CLINGAN
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-4-98

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SIDE TWO

COPY

Operator Name: WOOLSEY PETROLEUM CORPORATION Lease Name MEYER E Well # 1
County BARBER
Sec. 3 Twp. 35S Rge. 13W East 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 INDUCTION SHALLOW FOCUSED
BHC LONG SPACED SONIC W/ INTEGRATED TRANSIT TIME
COMPENSATED NEUTRON COMPENSATED PHOTO-DENSITY
SPECTRAL GAMMA RAY
SONIC CEMENT BOND

Log Formation (Top), Depth and Datums Sample
Name Top Datum
ONAGA 2944 (-1380)
HEEBNER 3950 (-2386)
DOUGLASS SS 4016 (-2452)
SWOPE 4633 (-3069)
MISSISSIPPIAN D 4844 (-3280)
KINDERHOOK 5136 (-3572)
VIOLA 5268 (-3704)
ARBUCKLE 5586 (-4022)
RTD 5652 (-4088)

DEC 3
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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#	57'	60/40 POZ	60	3% CC, 2% GEL
SURFACE	12-1/4"	8-5/8"	28#	216'	CLASS A	140	3% CC, 2% GEL
PRODUCTION	7-7/8"	4-1/2"	10.5#	5643'	ASC; 60/40 POZ	150; 150	

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
6 SPF	4850'-4862' (MISSISSIPPIAN) RELEASED	1400 GAL 15% FE RECEIVED	SAME
		10,000# 100 MESH SAND & KANSAS CORPORATION COMMISSION	
		118,500# 12-20 MESH SAND DEC 03 1996	SAME
FROM CONFIDENTIAL			
TUBING RECORD	Size 2-3/8" Set At 4905'	Packer At N/A	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No CONSERVATION DIVISION WICHITA, KS
Date of First, Resumed Production, SWD or Inj. 11/02/1996		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls. TRACE	Gas Mcf 90	Water Bbls. 25 Gas-Oil Ratio N/A Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)
METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled 4850'-4862'
Production Interval: Other (Specify) _____