FORM MUST BE TYPED C-5

SIDE ONE

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

API NO. 15- 065-21,995-00-00 16-6-22W

Operator: License # 6484

Name: Anderson Energy, Inc.

Address 200 E First St., Suite 414

City/State/Zip Wichita, KS 67202

Purchaser: N.C.R.A.

Operator Contact Person: William L. Anderson

Phone (316) 265-7929

Contractor: Name: Express Well Service

License: 6426

Wellsite Geologist: *

County Graham

120' N 70' W NE NW Sec. 16 Twp. 6 Rge. 22 X E W

540 Feet from S(N) (circle one) Line of Section

2050 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 Keiswetter Well # 1

Field Name Springbird

Producing Formation Oread 'B'

Elevation: Ground 2356 KB 2361

Total Depth 3920 PBTD 3560

Amount of Surface Pipe Set and Cemented at * Feet

Multiple Stage Cementing Collar Used? ____ Yes X No

If yes, show depth set ____ Feet

If Alternate II completion, cement circulated from ____

feet depth to ____ w/ ____ sx cmt.

Designate Type of Completion
____ New Well ____ Re-Entry X Workover

X Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: Energy Production, Inc.

Well Name: Keiswetter #1

Comp. Date 7/5/84 Old Total Depth 3920

____ Deepening X Re-perf. ____ Conv. to Inj/SWD
X Plug Back 3560 PBTD KCC JH
____ Commingled Docket No. ____
____ Dual Completion Docket No. ____
____ Other (SWD or Inj?) Docket No. ____

* See Original ACO-1, attached.

Spud Date | Date Reached TD | Completion Date

Drilling Fluid Management Plan REWORK JH 12-14-93
(Data must be collected from the Reserve Pit)

Chloride content ____ ppm Fluid volume ____ bbls

Dewatering method used ____

Location of fluid disposal if hauled offsite:

Operator Name ____

Lease Name ____ License No. ____

____ Quarter Sec. ____ Twp. ____ S Rng. ____ E/W

County ____ Docket No. ____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 William L. Anderson
William L. Anderson

Title Secy-Treas. Date ____

Subscribed and sworn to before me this 15th day of October, 19 92.

Notary Public Wilma E. Clark
Wilma E. Clark

Date Commission Expires August 5, 1996

WILMA E. CLARK
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. Aug. 5, 1996

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 16 1992
CONSERVATION DIVISION
WICHITA, KS

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received N/A
C ____ Geologist Report Received

Distribution
✓ KCC ____ SWD/Rep ____ NGPA
✓ KGS ____ Plug ✓ Other (Specify)

Form ACO-1 (7-91)

SIDE TWO

Operator Name Anderson Energy, Inc. Lease Name Keiswetter Well # 1

Sec. 16 Twp. 6 Rge. 22 ☐ East ☒ West County Graham

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.)	☐ Yes	☒ No	☐ Log	Formation (Top), Depth and Datums ☐ Sample
Samples Sent to Geological Survey	☐ Yes	☒ No	Name	Top Datum
Cores Taken	☐ Yes	☒ No		
Electric Log Run (Submit Copy.)	☐ Yes	☒ No		
List All E.Logs Run:			*	

* See original ACO-1 attached.

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

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate					
___ Protect Casing					
___ Plug Back TD					
___ 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
4	3710½-12½ Lansing 'H'	500 gal. 15% NE, retreat 3710½-12½	
		750 gal. 15% NE	
4	3520-23' Oread 'B'	750 gal. 15% NE	3520-23
	Baker Model 1AA CIBP @ 3560'		

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8"	3542'	N/A	☐ Yes ☒ No

Date of First, Resumed Production, SWD or Inj.	Producing Method
8/18/92	☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	55		30		28

Disposition of Gas:

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

METHOD OF COMPLETION

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled

☐ Other (Specify) _____

Production Interval

Oread 'B'

3520-23'