

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

Operator: License # 9354Name: Central Energy CorpAddress P.O. Box 47590City/State/Zip Wichita, Ks 67201

Purchaser: _____

Operator Contact Person: Gary PolteraPhone (316) 267-0707Contractor: Name: White & Ellis Drilling, Inc.License: 5420Wellsite Geologist: Jon T. Williams

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/Re-Entry: old well info as follows

Operator: _____

Well Name: _____

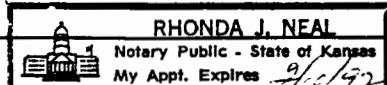
Comp. Date Old Total Depth 1992Deepening Re-perf. Conv. to inj/SWDPlug Back PBTCoringaled Docket No. _____Dual Completion Docket No. _____Other (SWD or Inj?) Docket No. _____Spud Date 6-22-90 Date Reached TD 6-27-90 Completion Date 6-28-90

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 Gary PolteraTitle Production Supervisor Date 8Jan92Subscribed and sworn to before me this 8 day of January, 19 92.Notary Public Rhonda J. Neal

Date Commission Expires _____

API NO. 15- 065-22,580County GrahamSW - NW - NW - Sec. 9 Twp. 7S Rge. 22 E

990' Feet from S/H (circle one) Line of Section

330' 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 Otoe Bank Well # 1Field Name Wildcat

Producing Formation _____

Elevation: Ground 2297 KB 2302Total Depth 3849 PBT Amount of Surface Pipe Set and Cemented at 299 FeetMultiple Stage Cementing Collar Used? Yes X NoIf yes, show depth set FeetIf Alternate II completion, cement circulated from feet depth to w/ sx cmt.

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

BIT D DrChloride content ppm Fluid volume bblsCirculating 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. _____

RECEIVED**KANSAS CORPORATION COMMISSION**

K.C.C. OFFICE USE ONLY
 Letter of Confidentiality Attached
 Wireline Log Received
 Geologist Report Received

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

Operator Name Central Energy Corp

Lease Name Otoe Bank Well # 1

East
Sec. 9 Twp. 7S Rge. 22

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.

Yes No Log Formation (Top), Depth and Datums Sample

Samples Sent to Geological Survey Yes No Name Top Datum

Yes No Base KC 3/39 -143/
Electric Log Run
(Submit Copy.)

List All E.Logs Run:

R.A. Guard

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
Surface	12 $\frac{1}{2}$	8 5/8	28#	299	60/40 pos	180	2% gel 3% ca

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
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

TUBING RECORD **Size** **Set At** **Packer At** **Liner Run** Yes No

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	_____