

STATE CORPORATION COMMISSION OF KANSAS
 OIL & GAS CONSERVATION DIVISION
 WELL COMPLETION FORM
 ACO-1 WELL HISTORY **34-95-12W**
 DESCRIPTION OF WELL AND LEASE

Operator: License # 3956
 Name: Brungardt Oil & Leasing Co
 Address: Box 871
 City/State/Zip: Russell, KS 67665

Purchaser: N/A
 Operator Contact Person: Gary L Brungardt
 Phone (913) 483-4975

Contractor: Name: Shields Drilling Co., Inc.
 License: 5184
 Well Site Geologist: Brad Hutchinson

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD S1OW 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 _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBSD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
 7-09-96 7-15-96 7-15-96
 Spud Date Date Reached TD Completion Date

API NO. 15- 141-203160000 **COPY**
 County Osborne
 SW - SE - SW - Sec. 34 Twp. 9 Rge. 12 E W
330 Feet from S/N (circle one) Line of Section
3630 Feet from E/W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 NE, NW or SW (circle one)
 Lease Name Brant Well # 3
 Field Name Cheyenne Gap
 Producing Formation None
 Elevation: Ground 1779 KB 1884
 Total Depth 3450' PBSD 3450
 Amount of Surface Pipe Set and Cemented at 954 Feet
 Multiple Stage Cementing Collar Used? Yes XXXX No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from _____
 feet depth to _____ w/ _____ sx cat.
 Drilling Fluid Management Plan D&A JH 5-15-97
 (Data must be collected from the Reserve Pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used Evaporation
 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 Gary L. Brungardt
 Title Owner Date 9-25-1996
 Subscribed and sworn to before me this 25th day of Sept
 19 96.
 Notary Public Cindy Ross
 Date Commission Expires 6/1/2000

CINDY ROSS
 State of Kansas
 My Appt. Exp June 1, 2000.

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) FS

50058
3

Operator Name Brungardt Oil & Leasing Co Lease Name Brant Well # 3

Sec. 34 Twp. 9 Rge. 12 East West County Osborne

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.)

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	943	+ 941
Lansing K-C	3111	-1227

List All E.Logs Run:
Radiation Guard Log

See attached geologist report for additional information

CASING RECORD <input type="checkbox"/> New <input 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		8 5/8"	28	954	40/60 Pozmix	325	-

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>N/A</u> Bbls.	Gas <u>N/A</u> Mcf	Water <u>N/A</u> Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: Vented Sold Heat Loss Open Hole Perf. Quality Comp. Commingled

METHOD OF COMPLETION Production Interval