

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

COPY ORIGINAL

Operator: License # 8735

Name: S & M Oil

Address 2730 Thunderbird Drive

City/State/Zip Hays, Kansas 67601

Purchaser: Farmland Ind.

Operator Contact Person: Steve Crawford

Phone (913)628-3658

Contractor: Name: Discovery Drilling, Inc.

License: 31548

Wellsite Geologist: Steve Crawford

Designate Type of Completion

New Well Re-Entry Workover

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening _____ Re-perf. _____ Conv. to Inj/SWD
Plug Back _____ PBDT
Commingled _____ Docket No. _____
Dual Completion _____ Docket No. _____
Other (SWD or Inj?) _____ Docket No. _____

3/13/97 3/18/97 3/19/97
Spud Date Date Reached TD Completion Date

API NO. 15- 163-23296 0000

County Rooks

30' W. CN/2 NW - SW Sec. 12 Twp. 9S Rge. 17W

2310 Feet from N (circle one) Line of Section

4650 Feet from W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE. NW or SW (circle one)

Lease Name McClay Well # 11

Field Name Westhusin

Producing Formation Arbuckle

Elevation: Ground 2022 KB 2030

Total Depth 3527 PBDT _____

Amount of Surface Pipe Set and Cemented at 205.36 Ft

Multiple Stage Cementing Collar Used? Yes _____

If yes, show depth set 1850 Ft

If Alternate II completion, cement circulated from 1850

feet depth to Surface w/ 450 sx cm

Drilling Fluid Management Plan ALT 2 1-13-98 JK
(Data must be collected from the Reserve Pit)

Chloride content 24,000 ppm Fluid volume 2000 bb

Dewatering method used Evaporation

Location of fluid disposal if hauled off site: _____

Operator Name _____

Lease Name _____ License # _____

Quarter _____ Sec. _____ Twp. _____ E/W _____

County _____ Docket No. _____

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APR 10 10 58 AM '97

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 PERMITTING 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 Steve Crawford

Title Owner Date 4-8-97

Subscribed and sworn to before me this 28 day of April 19 97.

Notary Public Roberta Angell

Date Commission Expires 10-24-2000

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input checked="" type="checkbox"/>	NGPA	<input type="checkbox"/> Other (Specify)

ROBERTA ANGELL
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 10-24-2000

Operator Name S & M OilLease Name McC Well # 11Sec. 12 Twp. 9S Rge. 17W EastCounty Rooks West59018

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 of 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:

Radiation Guard
Gamma Ray Neutron
Cement Bond

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Topeka	2890	- 859
Heebner	3106	-1075
Kansas City	3147	-1116
Arbuckle	3425	-1394

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 Pipe	12 $\frac{1}{4}$	8 5/8	20	205.36	60/40Poz	140	2%Gel&3%CC
Production St.	7 7/8	5 $\frac{1}{2}$	14	3504	ASC	150	
			DV Tool	1850	60/40Poz	450	6%Gelw/1/4#FS

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 Recd (Amount and Kind of Material Used)	Depth
4	3433-35	Natural	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 7/8	3470	none		
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
	3-29-97				
Estimated Production Per 24 Hours	Oil Bbls. 77	Gas Hcf ----	Water Bbls. 50	Gas-Oil Ratio 61	Gravity 22

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

3433-35