

COPY

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- 15-163,23158

County ROOKS

100 FT WEST OF
SE NE NW Sec. 17 Twp. 9 Rge. 18 East West

4290 Ft. North from Southeast Corner of Section

3070 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name STAHL Well # #6

Field Name MCHALE

Producing Formation Arbuckle

Elevation: Ground 2085 KB 2090

Total Depth 3570 PBDT 3544

Operator: License # 5635

Name: THE GENE BROWN COMPANY

Address DRAWER #220

City/State/Zip PLAINVILLE, KS 67663

Purchaser: Farmland Industries

Operator Contact Person: TOM BROWN

Phone (913) 434-4811

Contractor: Name: RED TIGER DRILLING CO.

License: 5302

Wellsite Geologist: Micheal A. Davignon

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

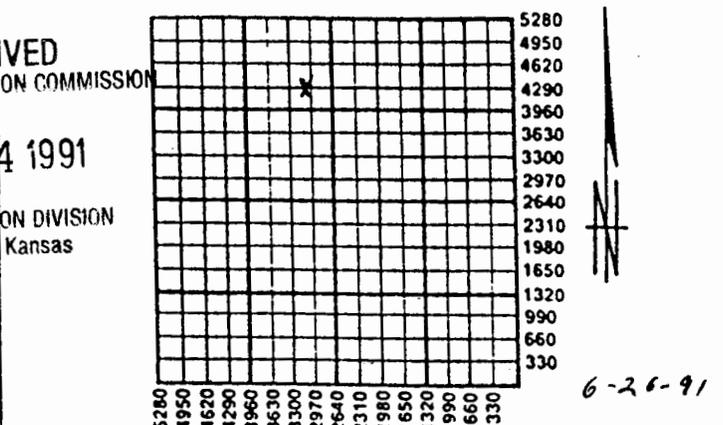
If OWO: old well info as follows:
Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable

4-12-91 4-16-91 4-22-91
Spud Date Date Reached TD Completion Date



Amount of Surface Pipe Set and Cemented at 224.15 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 1458 Feet

If Alternate II completion, cement circulated from 1458

feet depth to surface w/ 50 sks - 60/40
225 sks - lite sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 [Signature]

Title Development Supervisor Date 6-19-91

Subscribed and sworn to before me this 19th day of June, 1991.

Notary Public [Signature]

Date Commission Expires May 27, 1991

NOTARY PUBLIC - State of Kansas
KATHY A. WISE
My Appt. Exp. 5-27-91

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

SIDE TWO

Operator Name THE GENE BROWN COMPANY Lease Name STAHL Well # #6
 Sec. 17 Twp. 9 Rge. 18 East County ROOKS
 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)	<p style="text-align: center;">Formation Description</p> <p><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> </thead> <tbody> <tr><td>Anhydrite</td><td>1454</td><td></td></tr> <tr><td>Topeka</td><td>3016</td><td></td></tr> <tr><td>Heebner</td><td>3224</td><td></td></tr> <tr><td>Toronto</td><td>3244</td><td></td></tr> <tr><td>LKC</td><td>3263</td><td></td></tr> <tr><td>Base KC</td><td>3486</td><td></td></tr> <tr><td>Arbuckle</td><td>3510</td><td></td></tr> </tbody> </table>	Name	Top	Bottom	Anhydrite	1454		Topeka	3016		Heebner	3224		Toronto	3244		LKC	3263		Base KC	3486		Arbuckle	3510	
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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
SURFACE	12 1/4"	8 5/8"	20	224.15	60-40POZ	135	2%GEL, 3%CC
PRODUCTION	7 7/8"	5 1/2"	14	3557	60-40POZ	160	2%GEL, 1/4# flo-seal

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4 per foot	3529-32	500gl - 20% HCL	

TUBING RECORD Size 2 7/8 Set At 3535 Packer At - Liner Run Yes No

Date of First Production 4-22-91 Producing Method Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	40	-0-	100		19

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled Other (Specify) _____

Production Interval 3529-32