

COPY 2235

SIDE ONE

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

Operator: License # 5131

Name: Thunderbird Drilling, Inc.

Address P.O. Box 780407

City/State/Zip Wichita, KS 67278

Purchaser: _____

Operator Contact Person: Burke B. Krueger

Phone (316) 685-1441

Contractor: Name: Abercrombie Drilling, Inc.

License: 5422

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If **OWMO**: old well info as follows:

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

2-18-91 2-27-91 _____

Spud Date Date Reached TD Completion Date

API NO. 15- 193-20,544

County Thomas

160' N W/2 East

NE/4 NW/4 Sec. 36 Twp. 9S Rge. 32 West

4780' Ft. North from Southeast Corner of Section

3960' Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

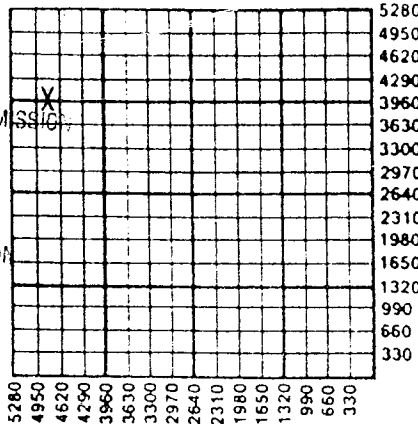
Lease Name Nye A Well # 1

Field Name Wildcat

Producing Formation Lansing - KC

Elevation: Ground _____ KB _____

Total Depth 4740' PBTD _____



Alt II DRA

Amount of Surface Pipe Set and Cemented at 344' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ 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.

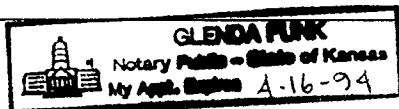
Signature Burke B. Krueger

Title VP Date 3-28-91

Subscribed and sworn to before me this 28th day of MARCH

91.
Notary Public Glenda Funk

Date Commission Expires _____



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Drillers Time Log Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other (Specify) I.S.

COPY

SIDE TWO

36-9-32W

Operator Name Thunderbird Drilling, Inc. Lease Name Nye A Well # 1

Sec. 36 Twp. 9S Rge. 32 East West
 County Thomas

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.)
ATTACHED

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

Formation Description

Log Sample

Name _____ Top _____ Bottom _____

ATTACHED

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	12 1/4"	8 5/8"	28#	344'	60-40pozmix	210	2% gel 3% cc
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			Amount and Kind of Material Used			Depth
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No			
	Size	Set At	Packer At				
Date of First Production	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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio
							Gravity

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 _____

RECEIVED

MAY 19 1968

MAY 19 1968