

ORIGINAL

SIDE TWO

Operator Name Adeco, Inc. & Chambers Lease Name Chambers Well # 7

Sec. 29 Twp. 1S Rge. 26W East West County Decatur

WELL LOG

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 [X] Yes [] No
Samples Sent to Geological Survey [] Yes [X] No
Cores Taken [] Yes [X] No

Formation Description [X] Log [] Sample

* See attached Geol. Report.

Name Top Bottom * See ATTACHED Geol. report

CASING RECORD [X] New [] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Purpose of String Size Hole Size Casing Weight Setting Type of #Sacks Type and
Drilled Set (in O.D.) Lbs/Ft. Depth Cement Used Percent
Surface 12 1/4" 8 5/8" 20# 245' 60/40 Poz 185 2% Gel 3%CC
PERFORATION RECORD
Shots Per Foot Specify Footage of Each Interval Perforated Acid, Fracture, Shot, Cement Squeeze Record
Depth
TUBING RECORD Size Set At Packer at Liner Run [] Yes [] No
Date of First Production Producing Method [] Flowing [] Pumping [] Gas Lift [] Other (explain)
Estimated Production Per 24 Hours Oil Gas Water Gas-Oil Ratio Gravity
Bbls MCF Bbls CFPB

METHOD OF COMPLETION

Production Interval

Disposition of gas: [] Vented [] Open Hole [] Perforation
[] Sold [] Other (Specify)
[] Used on Lease [] Dually Completed
[] Commingled

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

API NO. 15-039-20,853
County Decatur
NE/4 NW/4 SW/4 29 1S 26W East
Sec. Typ. Rge. X West

Operator: License # 8981
Name Adeco, Inc. & Chambers
Address 310 East Ash
City/State/Zip Oberlin, Ks. 67749

2300 Ft North from Southeast Corner of Section
4030 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser.....

Lease Name Chambers Well # 7

Operator Contact Person Mr. Lester Chambers
Phone 913-475-3468

Field Name.....

Producing Formation.....

Contractor: License # 5302
Name Red Tiger Drilling Company

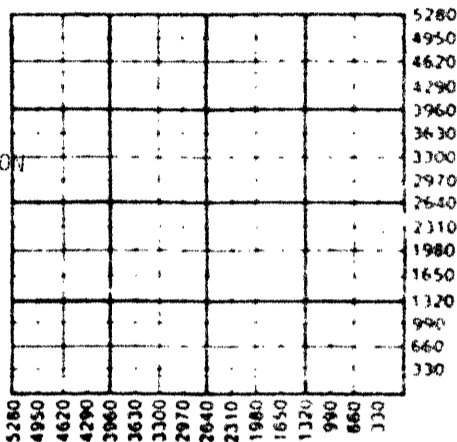
Elevation: Ground 2556 KB

Wellsite Geologist.....
Phone.....

Elevation: Ground 2556 KB

Designate Type of Completion
X New Well Re-Entry Workover
Oil SWD Temp Abd
Gas Inj Delayed Comp.
X Dry Other (Core, Water Supply etc.)

RECEIVED
STATE CORPORATION COMMISSION
JUL 20 1989
7-20-89
CONSERVATION DIVISION
Wichita, Kansas



If OMWO: old well info as follows:
Operator.....
Well Name.....
Comp. Date..... Old Total Depth.....

WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

WELL HISTORY
Drilling Method: X Mud Rotary Air Rotary Cable
5/4/89 5/10/89 5/11/89
Spud Date Date Reached TD Completion Date
3,778'
Total Depth PRTO

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit # 21101

X Groundwater 800 Ft North from Southeast Corner
(Well) 5000 Ft West from Southeast Corner of
Sec 9 Twp 1S Rge 26 East X West
Bill Schwab, Norcauter, Ks. 67653
Surface Water..... Ft North from Southeast Corner
(Stream, pond etc.)..... Ft West from Southeast Corner
Sec Twp Rge East West
Other (explain).....
(purchased from city, R.W.O. #)

Amount of Surface Pipe Set and Cemented at 237.57 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set..... feet
If alternate 2 completion, cement circulated
from..... feet depth to..... w/..... SX cmf
Cement Company Name.....
Invoice #.....
A1-J Dyo

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. Submit OP-4 form with all plugged wells. Submit OP-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 Lester L Chambers

Title Owner Date 7-19-89

Subscribed and sworn to before me this 19th day of July 1989

Notary Public Maria A Crawford

Date Commission Expires 10/27/91

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)

29-1-89
26W

Operator Name **Adeco, Inc. & Chambers** Lease Name **Chambers** Well # **7**

Sec. **29** Twp. **1S** Rge. **26W** East West County **Decatur**

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
SEVERY	3152	
TOPEKA	3180	
GREAT	3280	
TORONTO	3330	
LANSING	3340	
Base Kc	3560	
GRANITE	3671	

CASING RECORD <input checked="" 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"	20#	245'	60/40 Poz	185	2% Gel 3% CC

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

TUBING RECORD			
Size	Set At	Packer at	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

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	Gas	Water	Gas-Oil Ratio	Gravity
	Bbls	MCF	Bbls	(FPB)	

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Sold Used on Lease
 Open Hole Perforation Other (Specify)
 Dually Completed Commingled