

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31900
Name: Nor-West Kansas Oil, L.L.C.
Address: RR 2, Box 14,
City/State/Zip: WaKeeney, KS 67672
Purchaser: NCRA
Operator Contact Person: Patrick G. Wanker
Phone: (785) 743-2769
Contractor: Name: Murfin Drilling Company, Inc.
License: 30606
Wellsite Geologist: Randy Kilian

API No. 15 - 179-21114-00-00
County: Sheridan
SW SE NE Sec. 3 Twp. 10 S. R. 29 East West
2590 feet from S (N) (circle one) Line of Section
1000 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: Bixenman Well #: 1
Field Name: W C C Southeast Extension
Producing Formation: Lansing - Kansas City
Elevation: Ground: 2796 Kelly Bushing: -5 feet
Total Depth: 4530 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 231 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
Alternate II completion, cement circulated from 231
feet depth to cellar w/ 150 sks.com 3% cc 2%gel 5 sx cmr.

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

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If Workover/Re-entry: Old Well Info as follows:
Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____
 Deepening Re-perf. Conv. to Enhr./SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

2/28/04 3/7/04 4/27/04
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: _____
Title: Operator Date: June 16, 2004
Subscribed and sworn to before me this 16th day of June
20 004
Notary Public: Maury Ann Johnson
Date Commission Expires: 9/9/04

KCC Office Use ONLY
 Letter of Confidentiality Received
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

