

This form shall be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry, SWD, OWWO, injection. Type and complete ALL sections. Applications must be filed for dual completion, commingling, salt water disposal and injection. Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.) KCC#-(316)263-3238.

OPERATOR Abraxas Petroleum Corporation

API NO. 15-039-20,620-0000

ADDRESS Box 17435, 1100 N.E. Loop 410
San Antonio, Texas 78217

COUNTY Decatur
FIELD Wildcat

**CONTACT PERSON LeRoy E. Wessel
PHONE 512-828-5354

PROD. FORMATION _____
LEASE Rogers

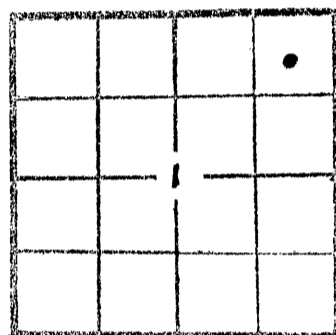
PURCHASER _____
ADDRESS _____

WELL NO. #1
WELL LOCATION NE NE

DRILLING CONTRACTOR Rains & Williamson Oil Co., Inc.
ADDRESS 435 Page Court, 220 W. Douglas
Wichita, Kansas 67202

_____ Ft. from _____ Line and
_____ Ft. from _____ Line of
the SEC. 1 TWP. 3S RGE. 30W

PLUGGING Same
CONTRACTOR ADDRESS _____



WELL PLAT
KCC _____
KGS _____
MISC _____
(Office Use)

TOTAL DEPTH 4365' PBTD _____

SPUD DATE 1-4-82 DATE COMPLETED 1-12-82

ELEV: GR 2762' DF _____ KB _____

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS _____
CASING RECORD

(New) / (Used) casing.

Report of all strings set— surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	12 1/4"	8 5/8"	24#	231'	60/40 poz.	185 sx.	2% gel, 3% cc.

RECEIVED
STATE CORPORATION COMMISSION
1-29-82
JAN 29 1982

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD

Size	Setting depth	Packer set of

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

Date of first production _____ Producing method (flowing, pumping, gas lift, etc.) _____ Gravity _____

RATE OF PRODUCTION PER 24 HOURS	Oil	Gas	Water	Gas-oil ratio
	bbls.	bbls.	MCF	CFPB

Disposition of gas (vented, used on lease or sold) _____ Perforations _____

*The person who can be reached by phone regarding any questions concerning this information. A witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.

Name of lowest fresh water producing stratum _____ Depth _____

Estimated height of cement behind Surface Pipe Cement circulated

DV USED? _____

WELL LOG

Formation Description, Contents, etc.		TOPS	Name	Depth
Stone Corral		2523		
Heebner		3737		
Toronto		3770		
Lansing		3782		
Base of K.C.		4012		
Cherokee		4184		
Mississippi		4293		
Arbuckle		4382		

A F F I D A V I T

STATE OF See Driller's Log, COUNTY OF _____ SS, _____

_____ OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH,

DEPOSES THAT HE IS _____ (FOR)(OF) _____

OPERATOR OF THE _____ LEASE, AND IS DULY AUTHORIZED TO MAKE

THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. _____ ON

SAID LEASE HAS BEEN COMPLETED AS OF THE _____ DAY OF _____, 19____, AND THAT

ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.

(S) _____

SUBSCRIBED AND SWORN BEFORE ME THIS _____ DAY OF _____ 19____

NOTARY PUBLIC

MY COMMISSION EXPIRES: _____