

FORM MUST BE TYPED

ORIGINAL

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 # 4767

Name: Ritchie Exploration, Inc.

Address P.O. Box 783188

City/State/Zip Wichita, KS 67278

Purchaser: Koch Oil Company

Operator Contact Person: Julie Stout

Phone (316) 691-9500

Contractor: Name: _____

License: **CONFIDENTIAL**

Wellsite Geologist: _____

Designate Type of Completion
____ New Well ____ Re-Entry Workover

Oil ____ SWD ____ S10W ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:

Operator: Ritchie Exploration, Inc.

Well Name: #2 Nanette Hilgers

Comp. Date 10-92 Old Total Depth 3701

Deepening ____ Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PBDT
____ Commingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Inj?) ____ Docket No. ____

12-15-97 12-22-97
Spud Date of Date Reached TD Completion Date
Start of Rework. *of Rework*

API NO. 15- 163-23,211
County Rooks

SE -NW - NW- ____ Sec. 28 Twp. 6S Rge. 20 W
4290 Feet from S/N (circle one) Line of Section
4290 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

Lease Name Nanette Hilgers Well # 2

Field Name _____

Producing Formation Arbuckle

Elevation: Ground 2218 KB 2223

Total Depth 3711 PBDT _____

Amount of Surface Pipe Set and Cemented at _____ 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.

Drilling Fluid Management Plan Rework, 9-25-98 *UC.*
(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 RELEASED 2001 **KCC**
3-28-2001 **FEB 25**

Lease Name _____ License No. _____ **CONFIDENTIAL**

____ Quarter Sec. Twp. ____ S Rng. ____ E/W

County FROM CONFID 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 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 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 [Signature]

Title President Date 2-24-98

Subscribed and sworn to before me this 24th day of February, 19 98.

Notary Public [Signature]

Date Commission Expires July 23, 2001

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Geologist Report Received

Distribution
____ KCC ____ SWD/Rep ____ NGPA
____ KGS ____ Plug ____ Other
FEB 25 (Specify)

JULIE K. STOUT
Notary Public - State of Kansas
My Appt. Expires 7-23-2001

Form ACO-1 (7-91) 2-26-98

Operator Name Ritchie Exploration, Inc. Lease Name Nanette Hilliers Well # 2

Sec. 28 Twp. 6 Rge. 20 East West County Rooks

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.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 List All E.Logs Run:

Log Formation (Top), Depth and Datums Sample
 Name Top Datum

RELEASED
 MAR 28 2001

FROM CONFIDENTIAL

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

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
		1000 gallons 15% PAD	3675'
		w/NE (10% zylene, 1%	
		acetic & Fe)	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2 3/8"	3659'	n/a			
Date of First, Resumed Production, SWD or Inj. 12-22-97				Producing Method <input type="checkbox"/> Flowing <input checked="" 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
		21				37	

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval Other (Specify) _____