

ORIGINAL

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 125 N. Market, Suite 1000

City/State/Zip Wichita, KS 67202

Purchaser: N/A

Operator Contact Person: Lisa Thimmesch

Phone (316) 267-4375

Contractor: Name: _____

License: CONFIDENTIAL

Wellsite Geologist: None

Designate Type of Completion
 New Well Re-Entry Workover

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

If Workover:

Operator: Ritchie Exploration, Inc.

Well Name: #2 E. Shughart

Comp. Date 7-96 Old Total Depth 4570

Deepening Re-perf. Conv. to Inj. SLD
 Plug Back _____ PBDT
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) _____ Docket No. D-27,282

1-10-97 1-24-97

1-10-97 Date of START Date Reached TD 1-24-97 Completion Date of WORKOVER

API NO. 15- 193-20,6520001

County Thomas

SE - NW - Sec. 11 Twp. 6 Rge. 33W

1980 Feet from S/W (circle one) Line of Section

1980 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 E. Shughart Well # 2

Field Name ROVOHL

DISPOSAL LKC
Producing Formation _____

Elevation: Ground 3098 KB 3103

Total Depth 4570 PBDT 4222

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 JK 4-8-97
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used FEB 3

Location of fluid disposal CONFIDENTIAL hauled offsite

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ Rge. _____

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 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 1/31/97

Subscribed and sworn to before me this 31st day of January, 19 97

Notary Public [Signature]

Date Commission Expires _____

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 (Specify)

LISA THIMMESCH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 8-29-99

Operator Name Ritchie Exploration, Inc. Lease Name E. Shughart Well # 2

Sec. 11 Twp. 6 Rge. 33W 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.)
 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

PLEASE KEEP THIS INFORMATION 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
	4157'-4166'		

TUBING RECORD		Size	Set At	Packer At	Liner Run	DISPOSITION OF GAS: METHOD OF COMPLETION		
		2 3/8"		4119'	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Vented	<input type="checkbox"/> Sold	<input type="checkbox"/> Used on Lease
Date of First, Resumed Production, SWD or Inj.		Producing Method		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
1-14-97								
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 Perf. Dually Comp. Commingled Other (Specify) _____

DISPOSAL Production Interval: 4157'-4166'