

CONFIDENTIAL

FORM MUST BE TYPED

SIDE ONE

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

API NO. 15- 065-22,431001 ORIGINAL

County Graham

NW SE NE Sec. 1 Twp. 7 Rge. 21W E W

3730 Feet from S (circle one) Line of Section

990 Feet from E (circle one) Line of Section

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

Lease Name Trexler Well # 2

Field Name _____

Producing Formation L/KC, Toronto

Elevation: Ground 2158 XB 2163

Total Depth 3670 PSTD 3619

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 cnt.

Drilling Fluid Management Plan 0000 6-14-96
(Data must be collected from the Reserve Pit) RU

Chloride content _____ ppm Fluid volume MAY 2 bbls

Dewatering method used _____

Location of fluid disposal offsite

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

Operator: License # 4767

Name: Ritchie Exploration, Inc.

Address 125 N. Market, Suite 1000

City/State/Zip Wichita, KS 67202

Purchaser: N.C.R.A.

Operator Contact Person: Lisa Thimmesch

Phone (316) 267-4375

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

Designate Type of Completion
New Well _____ Re-Entry _____ X Workover

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

If Workover/Re-Entry: old well info as follows:

Operator: Ritchie Exploration, Inc.

Well Name: #2 Trexler

Comp. Date 4-88 Old Total Depth 3670

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

3-1-96 3-5-96

Spud Date _____ Date Reached TD _____ Completion Date _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 1200 Colorado Derby Building, 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 5-2-96

Subscribed and sworn to before me this 2nd day of May 1996.

Notary Public [Signature]

Date Commission Expires _____

LISA THIMMESCH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-29-99

PLEASE KEEP THIS INFORMATION CONFIDENTIAL

CONFIDENTIAL

1996 MAY 3 A 11:11
KANSAS CORP COM
RECEIVED

5-2-96

K.C.C. OFFICE USE ONLY
F X Letter of Confidentiality Attached
C X Wireline Log Received
C _____ Geologist Report Received
Distribution
X KCC _____ SWD/Rep _____ KCPA
_____ KGS _____ Plug _____ Other
(Specify)

Operator Name Ritchie Exploration, Inc. Lease Name Trexler Well # 2

Sec. 1 Twp. 7 Rge. 21W East West
 County Graham

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No			

List All E.Logs Run:

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

PLEASE KEEP THIS INFORMATION CONFIDENTIAL

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
	Top zone	3398' - 3402'		
	35' zone	3434' - 3438'		
3	90' zone	3474' - 3477'		
	50' zone	3453' - 3456'		
3	Toronto 3385' - 3388'		600 gal 15% NE	Toronto

TUBING RECORD		Size 2 3/8"	Set At 3610.88	Packer At NA	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or Inj. 3-5-96		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
	2				65			

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Other (Specify) _____

Production Interval _____