



Operator Name ..... N-B Company, Inc. .... Lease Name..... Wanker ..... Well #..... 2.....

Sec. 35 ..... Twp. 7S ..... Rge. 23 .....  East  West County..... Graham .....

WELL LOG

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  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No

DST #1 3624-3650 45-45-45-45  
 ISIP 377 IFP 86-122  
 FSIP 377 FFP 148-183  
 Recovered: 270' muddy water

DST #2 3740-3800 45-45-45-45  
 SIP 1127 IFP 56-73  
 SIF 1103 FFP 86-101  
 Recovered: 145' muddy water

Name	Formation Description	
	Top	Bottom
Anhydrite	1982	
Topeka	3342	
Heebner	3547	
Toronto	3573	
Lansing	3588	
Base K.C.	3792	
RTD	3800	

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
Surface	12 1/4"	8-5/8"	20	260	60/40 poz	180	3% c.c., 2% gel
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)		Depth	
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No			
Size	Set At	Packer at					
Date of First Production	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....						
Estimated Production Per 24 Hours	Oil	Gas	Water	Gas-Oil Ratio	Gravity		
	Bbls	MCF	Bbls	CFPB			

METHOD OF COMPLETION

Production Interval

Disposition of gas:  Vented  Open Hole  Perforation  
 Sold  Other (Specify) .....  
 Used on Lease  Dually Completed  
 Commingled

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

Operator: License # 6111  
Name N.B. Company, Inc.  
Address P.O. Box 506  
City/State/Zip Russell, KS 67665-0506

Purchaser

Operator Contact Person Kyle B. Branum  
Phone (913)-483-5345

Contractor: License # 8241  
Name Emphasis Oil Operations

Wellsite Geologist Irv Hardman  
Phone (913)-674-2562

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  Temp Abd  
 Gas  Inj  Delayed Comp.  
 Dry  Other (Core, Water Supply etc.)  
If **OWO**: old well info as follows:  
Operator  
Well Name  
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:  
 Mud Rotary  Air Rotary  Cable  
2-20-87 Spud Date 2-26-87 Date Reached TD 2-26-87 Completion Date  
3800' Total Depth PBDT

Amount of Surface Pipe Set and Cemented at 260 feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set feet  
If alternate 2 completion, cement circulated from feet depth to w/ SX cmt  
Cement Company Name  
Invoice #

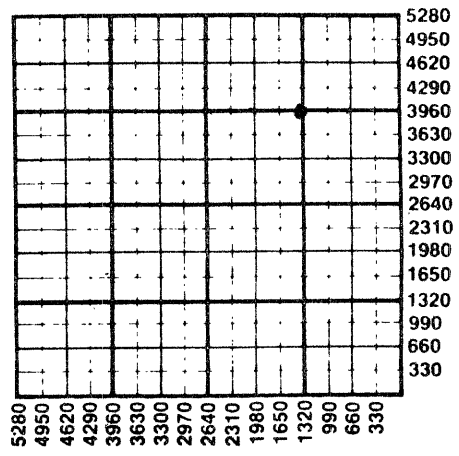
API NO. 15-065-22-352  
County Graham  
C NE/4 Sec 35 Twp 7S Rge 23W East  
3960 Ft North from Southeast Corner of Section  
1320 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

Lease Name Wanker Well # 2

Field Name Fabricius

Producing Formation

Elevation: Ground 2237' KB 2237' K.B.  
Section Plat



WATER SUPPLY INFORMATION  
Disposition of Produced Water:  Disposal  Repressuring  
Docket #

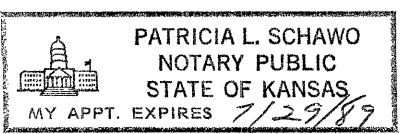
Questions on this portion of the ACO-1 call:  
Water Resources Board (913) 296-3717  
Source of Water:  
Division of Water Resources Permit #  
 Groundwater Ft North from Southeast Corner (Well) Ft West from Southeast Corner of Sec Twp Rge East West  
 Surface Water 4280 Ft North from Southeast Corner (Stream, pond etc) 1000 Ft West from Southeast Corner Sec 26 Twp 7S Rge 23 East West  
 Other (explain)  
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. 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 3/11/87

Subscribed and sworn to before me this 11th day of March 1987  
Notary Public Patricia L. Schawo  
Date Commission Expires July 29, 1989



K.C.C. OFFICE USE ONLY  
F Letter of Confidentiality Attached  
C Wireline Log Received  
C Drillers Time Log Received  
Distribution  
KCC SWD/Rep NGPA  
KGS Plug Other  
STATE CORPORATION COMMISSION  
MAR 13 1987

FORM ACO-1 (7/80)  
CONSERVATION DIVISION  
Wichita, Kansas  
3/13/87

Sec 35 Twp 7 Rge 23W

**SIDE TWO**

Operator Name ..... N-B Company, Inc. .... Lease Name..... Wanker ..... Well #..2.....

Sec...35..... Twp...7S..... Rge..23.....  East  
 West County...Graham.....

**WELL LOG**

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.....	.....			.....		.....	
.....	.....			.....		.....	
.....	.....			.....		.....	
.....	.....			.....		.....	
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