

ORIGINAL

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

Operator: License # 5091

Name: Howell Oil Co. Inc.

Address R.R.1 Box 22

City/State/Zip Burrton Ks. 67020

Purchaser: Conoco

Operator Contact Person: Steve Howell

Phone (316) 463-2609

Contractor: Name: Duke Drlg Co.

License: 5929

Wellsite Geologist: Tim Hellman

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

6-6-97 6-11-97 6-11-97
Spud Date Date Reached TD Completion Date

API NO. 15- 155-21412-0000

County Reno

60'N 60'E NW-SE-NW 13 Twp. 23 Rge. 4 XXXXW ^E

1590' Feet from SW (circle one) Line of Section

1710' Feet from SW (circle one) Line of Section

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

Lease Name Sabin Well # 7

Field Name Burrton

Producing Formation Mississippi

Elevation: Ground 1473 KB 1481

Total Depth 3637 PBSD 3550

Amount of Surface Pipe Set and Cemented at 271 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 ALT I WITHM 9-29-06
(Data must be collected from the Reserve Pit)

Chloride content 2000 ppm Fluid volume 750 bbls

Dewatering method used Vacuum Truck

Location of fluid disposal if hauled offsite:

Operator Name Howell Oil Co. Inc

Lease Name Pizinger #1 SWD License No. 5091

NW Quarter Sec. 18 Twp. 23 S Rng. 3 EW

County Harvey Docket No. E-26,100

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 Steve Howell
Title Pres Date 3-17-98
Subscribed and sworn to before me this 30 day of March, 1998.
Notary Public Ann Grench
Date Commission Expires December 2006

"NOTARY SEAL"
Ann Grench, Notary Public
Benton County, State of Arkansas
My Commission Expires 12/1/2006

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)

ORIGINAL

SIDE TWO

Operator Name Howell Oil Co., Inc.

Lease Name Sabin

Well # - 7

Sec. 13 Twp. 23 Rge. 4

East
 West

County Renov

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:

Cased Hole Gamma Ray Neutron

Name	Formation (Top), Depth and Datums	<input checked="" type="checkbox"/> Sample	
		Top	Datum
Heebner	2339		-858
Brn Im	2521		-1040
Lansing	2550		-1069
BKC	3001		-1520
Miss	3269		-1788
Kind Sh	3537		-2086
Hunton	3632		-2151
RTD	3637		-2156

CASING RECORD

New 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	17 1/2	13 3/8"	45#	270'	60/40 poz	250	3%cc 2% gel
Production	7 7/8	5 1/2"	14#	3635'	60/40 poz	200	Latex in last 80 sx

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	
		2	3305-07 & 3314-18
2	3323-27	1000 gal 15% NE acid	3323-27

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2 7/8"	3330'				
Date of First, Resumed Production, SMD or Inj.				Producing Method			
8-12-97				<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
	4		NA		250		39.5

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) _____