

TYPE

AFFIDAVIT OF COMPLETION FORM

ACO-1 WELL HISTORY

Compt. _____

SIDE ONE

(Rules 82-3-13Q and 82-3-107)

This form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ninety (90) days after the completion of a well, regardless of how the well was completed.

FOR INFORMATION REGARDING THE NUMBER OF COPIES TO BE FILED AND APPLICATIONS REQUIRING COPIES OF ACO-1 FORMS SEE PAGE TWO (2), SIDE TWO (2) OF THIS FORM.

F Letter requesting confidentiality attached.

C Attach ONE COPY of EACH wireline log run (i.e. electrical log, sonic log, gamma ray neutron log etc.)***Check here if NO logs were run _____.

PLEASE FILL IN ALL INFORMATION. IF NOT AVAILABLE, INDICATE. IF INFORMATION LATER BECOMES AVAILABLE, SUBMIT BY LETTER.

LICENSE # 5134 EXPIRATION DATE June 30, 1984

OPERATOR Graham-Michaelis Corporation API NO. 15-141-20,176-00-00

ADDRESS P. O. Box 247 COUNTY Osborne
Wichita, Kansas 67201 FIELD Ruggles South

** CONTACT PERSON Jack L. Yinger PROD. FORMATION Lansing
PHONE (316) 264-8394

PURCHASER Koch Oil Company LEASE Greene

ADDRESS P. O. Box 2256 WELL NO. 5 - 27
Wichita, Kansas 67201 WELL LOCATION NE NW SW

DRILLING Revlín Drilling, Inc. 2310 Ft. from South Line and
CONTRACTOR P. O. Box 293 970 Ft. from West Line of ~~(XXX)~~
ADDRESS Russell, Kansas 67665 the (Qtr.) SEC 27 TWP 10 SRGE 15 (W).

PLUGGING N/A

CONTRACTOR _____

ADDRESS _____

WELL PLAT (Office Use Only)

	27		

KCC
KGS
SWD/REP _____
PLG. _____
NGPA _____

TOTAL DEPTH 3450 PBDT N/A

SPUD DATE 7-28-83 DATE COMPLETED 8-24-83

ELEV: GR 1848 DF _____ KB 1853

DRILLED WITH (CABLE) (ROTARY) (~~XXX~~) TOOLS.

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASECD 78-224

Amount of surface pipe set and cemented set at 248' DV Tool Used? _____

TYPE OF COMPLETION THIS AFFIDAVIT APPLIES TO: (Circle ONE) - Oil Shut-in Gas, Gas, Dry, Disposal, Injection, Temporarily Abandoned. If OWWO, indicate type of re-completion _____. Other completion _____. NGPA filing _____.

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

A F F I D A V I T

Jack L. Yinger, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

Jack L. Yinger
(Name)

SUBSCRIBED AND SWORN TO BEFORE ME this 24th day of August, 19 83.

ALDINE M. JOHNSON
NOTARY PUBLIC
STATE OF KANSAS
My Appointment Expires:
3-19-85

MY COMMISSION EXPIRES:

Aldine M. Johnson
(NOTARY PUBLIC)

RECEIVED
STATE CORPORATION COMMISSION
9-15-83
SEP 15 1983

CONSERVATION DIVISION
Wichita, Kansas

** The person who can be reached by phone regarding any questions concerning this information.

SIDE TWO

ACO-1 WELL HISTORY **XXXX**

OPERATOR Graham-Michaelis Corp.

LEASE Greene

SEC. 27 TWP. 10S RGE. 15 (W)

FILL IN WELL INFORMATION AS REQUIRED:

WELL NO. 5 - 27

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Check if no Drill Stem Tests Run.				
Check if samples sent to Geological Survey				
Shale & Rock	0	40	Heebner	2957 (-1104)
Shale	40	974		
Anhydrite	974	1006	Lansing	3005 (-1152)
Shale	1006	2075		
Shale w/Lime	2075	2995	Conglomerate	3347 (-1494)
Lime	2995	3385		
Conglomerate	3385	3450	RTD	3450 (-1597)
RTD	3450			
DST #1 2722 - 2765/60"; Recovered 5' mud with oil staining in tool. IFP 46-46#/30"; FFP 46-46#/30"; ISIP 692#/60"; FSIP 150#/60".				
DST #2 2990 - 3060/90"; Recovered 80' watery mud with scum of oil. IFP 58-69#/30"; FFP 69-81#/60"; ISIP 852#/45"; FSIP 806#/90"; BHT 102°.				
DST #3 3071 - 3116/90"; Recovered 240' oil and gas cut muddy water (Grind-out: 12½% gas, 17½% oil, 20% mud, 50% water); IFP 69-104#/30"; FFP 127-139#/60"; ISIP 162#/45"; FSIP 185#/90"; BHT 108°.				
DST #4 3137 - 3215/60"; Recovered 35' slightly oil cut mud (Grind-out 10% gas, 10% oil, 70% mud, 10% water); IFP 69-69#/30"; FFP 81-81#/30"; ISIP 795#/60"; FSIP 703#/60"; BHT 108°.				
DST #5 3322-3361/90"; Recovered 270' frothy slightly mud cut oil. IFP 69-81#/30"; FFP 104-139#/60"; ISIP 521#/45"; FSIP 509#/90"; BHT 110°.				
If additional space is needed use Page 2,				

Report of all strings set — surface, intermediate, production, etc. **CASING RECORD** (New) or (Used)

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	12¼"	8-5/8"	24#	248'	Common Q.S.	170	
Production	7-7/8"	4-1/2"		3449'	Common	200	10% salt, 5 sx salt flush

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
			2 shots/foot		3006 - 3203 OA

TUBING RECORD

Size	Setting depth	Packer set at
2-7/8"	3407'	

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
22,100 gallons 28% mud acid	above perforations

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity
8/19/83		
Swab test 4 BOPH/4 hrs + water		
Estimated Production -I.P.	Oil bbls.	Gas MCF
	Water %	Gas-oil ratio bbls. CFPB
Disposition of gas (vented, used on lease or sold)		Perforations 3006 - 3203' OA

TYPE

AFFIDAVIT OF COMPLETION FORM

ACO-1 WELL HISTORY

Compt. _____

SIDE ONE

(Rules 82-3-130 and 82-3-107)

DOCKET NO. NP _____

This form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ninety (90) days after the completion of a well, regardless of how the well was completed.

FOR INFORMATION REGARDING THE NUMBER OF COPIES TO BE FILED AND APPLICATIONS REQUIRING COPIES OF ACO-1 FORMS SEE PAGE TWO (2), SIDE TWO (2) OF THIS FORM.

F _____ Letter requesting confidentiality attached.

C _____ Attach ONE COPY of EACH wireline log run (i.e. electrical log, sonic log, gamma ray neutron log etc.)***Check here if NO logs were run _____.

PLEASE FILL IN ALL INFORMATION. IF NOT AVAILABLE, INDICATE. IF INFORMATION LATER BECOMES AVAILABLE, SUBMIT BY LETTER.

LICENSE # 5134 EXPIRATION DATE _____

OPERATOR Graham-Michaelis Corporation API NO. 15-141-20,176

ADDRESS Box 247 COUNTY Osborne

Wichita, Kansas 67201 FIELD _____

** CONTACT PERSON Jack Yinger PROD. FORMATION _____
PHONE 613-264-8394 _____ Indicate if new pay.

PURCHASER _____ LEASE Greene

ADDRESS _____ WELL NO. #5-27

WELL LOCATION NE NW SW

DRILLING Revlin Drlg., Inc. 2310 Ft. from South Line and

CONTRACTOR ADDRESS Box 293 970 Ft. from West Line of (E)

Russell, Kansas 67665 the SW (Qtr.) SEC 27 TWP 10 RGE 15 (W).

PLUGGING none

CONTRACTOR ADDRESS _____

WELL PLAT

(Office Use Only)

KCC _____

KGS _____

SWD/REP _____

PLG. _____

NGPA _____

TOTAL DEPTH 3450 PBTB none

SPUD DATE 7-28-83 DATE COMPLETED 8-6-83

ELEV: GR 1850 DF _____ KB 1855

DRILLED WITH ~~ROTARY~~ (ROTARY) ~~TOOLS~~ TOOLS.

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE _____

Amount of surface pipe set and cemented set @ 248 DV Tool Used? _____

TYPE OF COMPLETION THIS AFFIDAVIT APPLIES TO: (Circle ONE) - Oil, Shut-in Gas, Gas, Dry, Disposal, Injection, Temporarily Abandoned. If OWWO, indicate type of re-completion _____. Other completion _____. NGPA filing _____.

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

A F F I D A V I T

Stanley C. Lingreen, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.



Stanley C. Lingreen
(Name)

SUBSCRIBED AND SWORN TO BEFORE ME this 5th day of August, 1983.

Paula J. Gibson
(NOTARY PUBLIC)

MY COMMISSION EXPIRES: November 10, 1984

** The person who can be reached by phone regarding any questions concerning this information.

Side TWO

OPERATOR Graham-Michaelis Corp. LEASE NAME Greene SEC 27 TWP 10 RGE 15 (E) (W)

FILL IN WELL INFORMATION AS REQUIRED: WELL NO #5-27

Show all important zones of porosity and contents thereof; core intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

Show Geological markers, logs run, or other Descriptive information.

Formation description, contents, etc.	Top	Bottom	Name	Depth
<p>Check if no Drill Stem Tests Run. _____</p> <p>Check if samples sent Geological Survey. _____</p>				
Shale & Rock	00	40		
Shale	40	974		
Anhydrite	974	1006		
Shale	1006	2075		
Shale w/ Lime	2075	2995		
Lime	2995	3385		
Conglomerate	3385	3450 R.T.D.		
<p>DST #1 2722-2765 43' anchor 30-60-30-60 Rec: 5' mud w/ oil show in tool</p> <p>DST #2 2990-3060 70' anchor 30-45-60-90 Rec: 80' watery mud w/ little oil in tool</p> <p>DST #3 3071 -3116 45' anchor 30-45-60-90 Rec: 240' oil cut muddy water</p> <p>DST #4 3137-3215 78' anchor 30-60-30-60 Rec: 35' oil cut mud</p> <p>DST #5 3322-3361 39' anchor 30-45-60-90 Rec: 270' heavy frothy oil</p>				
If additional space is needed use Page 2				

Report of all strings set — surface, intermediate, production, etc. CASING RECORD (New) or (Misused)

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Socks	Type and percent additives
Surface	12 1/4	8 5/8	24#	248	Com. Q.S.	170	
Production	7 7/8	4 1/2		3449	Common	200	10% Salt 5sx salt flush

LINER RECORD			PERFORATION RECORD		
Top, ft.	Bottom, ft.	Socks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD		
Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity

Estimated Production-I.P.	Oil bbls.	Gas MCF	Water %	Gas-oil ratio bbls.	CFPB

Disposition of gas (vented, used on lease or sold)

Perforations