

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

Operator: License # 30347
Name: DECAB Company
Address P. O. Box 609

City/State/Zip Hays, KS 67601

Purchaser: _____

Operator Contact Person: Tom Younger

Phone (913) -625-9148

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Ron Nelson

Designate Type of Completion

New Well Re-Entry Workover

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

5/7/92 5/14/92 6-8-92
Spud Date Date Reached TD Completion Date

API NO. 15- 163,23,201 ⁰⁰⁻⁰⁰

County Rooks

C E/2 NW-SE - Sec. 33 Twp. 8S Rge. 19 E
X W

1980 Feet from (S/N) (circle one) Line of Section
1650 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 Amrein Well # 1

Field Name _____

Producing Formation LKC

Elevation: Ground 1991' KB 1996'

Total Depth 3447' PBTB _____

Amount of Surface Pipe Set and Cemented at 262 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 3438
feet depth to TOP w/ 375 sx cmt.

Drilling Fluid Management Plan ALT 1 OK DR
(Data must be collected from the Reserve Pit) DISTRICT 4 OK
10-9-92
OK DISTRICT 4

Chloride content 28000 ppm Fluid volume 400 bbls

Dewatering method used AIR DRY & CLOSE PITS

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 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 Thomas J. Younger
Title THOMAS J. YOUNGER Date 8-20-92

Subscribed and sworn to before me this 20TH day of AUGUST, 19 92.

Notary Public Karen Randa
KAREN RANDA
Date Commission Expires 5-14-93

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
AUG 24 1992
Distribution _____
KCC _____ NGPA _____
KGS _____ Other _____
(Specify)

Operator Name DECAB Company Lease Name Amrein Well # 1
 Sec. 33 Twp. 8S Rge. 19 East County Rooks
 West

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	TOP ANHYDRITE	1411	+585
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	BASE ANHYDRITE	1449	+546
List All E.Logs Run:		TOPEKA	2941	-945
		HEEBNER	3147	-1150
		TORONTO	3175	-1178
		LKC	3192	-1194
		BKC	3393	-1397
		ARBUCKLE	3428	-1432

CASING RECORD <input type="checkbox"/> New <input checked="" 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	28	262	COMMON	150	60/40 POZ 2% 3%CC
PRODUCTION	7 7/8	5 1/2	14	3438	LITE COMMON	375	NA

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
2	3193		2000 GAL 15% NE ACID	3193 3410
2	3229			
2	3267			
8	3359	3410 BRIDGE PLUG		

TUBING RECORD Size 2 3/8 Set At 3282 Packer At BAKER TENNISON Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 6-15-92 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil <u>12</u> Bbls.	Gas <u>97</u> Mcf	Water <u>200</u> Bbls.	Gas-Oil Ratio <u>NA</u>	Gravity <u>34.6%</u>
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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 _____