

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 6137
Name: Donald & Jack Ensminger
Address: 1446-3000 St.
City/State/Zip: Moran, Kansas 66755
Purchaser: Crude Marketing
Operator Contact Person: Don Ensminger
Phone: (316) 496-2300 or 496-7181 Cell
Contractor: Name: Company tools
License: 6137
Wellsite Geologist: _____

Designate Type of Completion:
____ New Well ____ Re-Entry XX Workover
____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas XX ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:
Operator: Donald & Jack Ensminger
Well Name: Pavlicek A-5

Original Comp. Date: 3-30-84 Original Total Depth: 664
____ Deepening ____ Re-perf. XXX Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled ____ Docket No. _____
____ Dual Completion ____ Docket No. _____
____ Other (SWD or Enhr.?) ____ Docket No. _____
3-10-00 3-30-84 3-10-00
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 15-001-26789-0001
County: Allen
SW NW NE Sec. 34 Twp. 25 S. R. 21 East
4630 feet from S / N (circle one) Line of Section
2060 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Pavlicek Well #: A-5
Field Name: East Elsmore
Producing Formation: Bartlesville
Elevation: Ground: Ground Kelly Bushing: _____
Total Depth: 664 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 20' 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 OWWO, 3-31-00-NC
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used Air dry backfill & level
Location of fluid disposal if hauled offsite: RECEIVED STATE CORPORATION COMMISSION
Operator Name: _____
Lease Name: _____ License No. MA 312000
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No. CONSERVATION DIVISION WICHITA, KANSAS

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 of 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: Donald Ensminger
Title: _____ Date: _____
Subscribed and sworn to before me this 30th day of March
2000
Notary Public: Ginger J. McComas
Date Commission Expires: 4-11-2001

GINGER L. MCCOMAS
Notary Public - State of Kansas
My Appt. Expires 4-11-2001

KCC Office Use ONLY
____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

ORIGINAL

Side Two

Operator Name: Donald & Jack Ensminger Lease Name: Pavlicek Well #: A-5-
Sec. 32 Twp. 25 S. R. 21 [X] East [] West County: Allen

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken [] Yes [X] No
(Attach Additional Sheets)

Samples Sent to Geological Survey [] Yes [X] No

Cores Taken [] Yes [X] No

Electric Log Run [] Yes [X] No
(Submit Copy)

List All E. Logs Run:

[] Log Formation (Top), Depth and Datum [X] Sample

Name	Top	Datum
Soil	0	3
Ls with Sh streaks	3	144
Sh with Ls streaks	144	616
Oil Sand	616	662 TD

CASING RECORD							
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	# Sacs Used	Type and Percent Additives
Surface	10 1/2"	6 5/8	18	20'	Common	5 Sx	None
Production	5 1/2"	2 7/8	6 1/2	618	Common	75 Sx	2% gel

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
none	Open Hole	Shot	618-662

TUBING RECORD		Set At	Packer At	Liner Run
Date of First, Resumerd Production, SWD or Enhr. When approved for injection		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs.	Gas-Oil Ratio

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval: _____

