

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

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

API NO. 15- 055-21643-00-00
County Finney
SW - NE - NE Sec. 2 Twp. 22S Rge. 33W

Operator: License # 32166

1250 Feet from S/W (circle one) Line of Section

Name: Dunne Equities Operating, Inc.

1250 Feet from E/W (circle one) Line of Section

Address 8100 E. 22nd Street North #1100

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

City/State/Zip Wichita, KS 67226-2311

Lease Name Corrigan Well # 1-2

Purchaser: _____

Field Name Hugoton

Operator Contact Person: Donna Armistead

Producing Formation NONE

Phone (316) 684 6508

Elevation: Ground 2878 KB _____

Contractor: Name: Murfin Drilling

Total Depth 2871 PSTD _____

License: 30606

Amount of Surface Pipe Set and Cemented at 318 Feet

Wellsite Geologist: Bob Posey

Multiple Stage Cementing Collar Used? _____ Yes X No

Designate Type of Completion
X New Well _____ Re-Entry _____ Workover _____

If yes, show depth set _____ Feet

Oil _____ SVD _____ SIOW _____ Temp. Abd.
Gas _____ ENHR _____ SIGW _____
X Dry _____ Other (Core, WSV, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sz cnt.

If Workover/Re-Entry: old well info as follows:

Drilling Fluid Management Plan PLA 6-5-'00
(Data must be collected from the Reserve Pit)

Operator: _____

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _____

Dewatering method used _____

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite: _____

Deepening _____ Re-perf. _____ Conv. to Inj/SVD
Plug Back _____ PSTD _____
Commingled _____ Decket No. _____
Dual Completion _____ Decket No. _____
Other (SVD or Inj?) Decket No. _____

Operator Name _____

Lease Name _____ License No. _____

6-11-99 6-16-99 7-13-99
Spud Date Date Reached TD Completion Date

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

County _____ Decket 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 Donna Armistead

Title Vice President Date 2-29-00

Subscribed and sworn to before me this 29th day of February, 19 2000

Notary Public Alexis R Wood

Date Commission Expires _____

ALEXIS R. WOOD
Notary Public - State of Kansas
My Appl. Expires 2-3-2002

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C X Wireline Log Received
C X Geologist Report Received
Distribution
_____ KCC _____ SVD/Rep _____ NEPA
_____ KGS _____ Plug _____ Other
(Specify)

Operator Name Dunne Equities Operating, Inc.

Lease Name Corrigan

Well # 1-2

County Finney

ORIGINAL
 Sec. 2 Twp. 22S Rge. 33W

East
 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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

CPI, DCPL, ML, DCPL, CPI, SCBL
 List All E.Logs Run:

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Krider	2620	
Winfield	2669	
Upper Ft. Riley	2732	
Lower Ft. Riley	2780	

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	12 1/2	8 5/8		318	Prem	220	Surface
Production	7 3/4	5 1/2		2872	Midcon	265	900

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	2626-2634		

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. P+A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>N-A</u>				

Disposition of Gas:

METHOD OF COMPLETION

Vented Sold Used on Lease
 (If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

Production Interval _____