

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

5

API NO. 15-.....015-23-112-00-00.....

County Butler.....

SE 1/4 SE 1/4 SE 1/4 Sec. 27. Twp 27S. Rge. 3.... East
..... West

.....330! Ft North from Southeast Corner of Section
.....330! Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

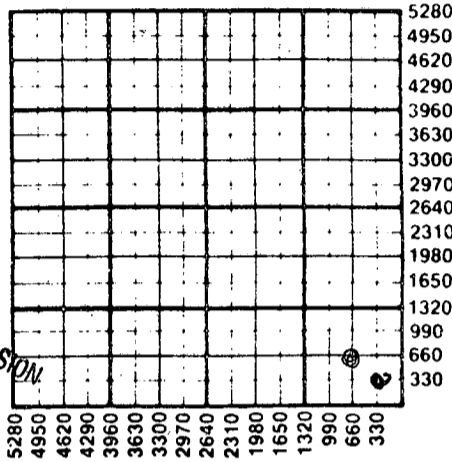
Lease Name Glen-Max, Inc. ^{KCC} _{ZAP} Well # 1.....

Field Name N/A.....

Producing Formation N/A.....

Elevation: Ground 1310.....KB 1315.....

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: _____ Disposal
Docket # _____ _____ Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #.....

_____ Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge _____ East _____ West

_____ Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge _____ East _____ West

Other (explain) Purchased.....
(purchased from city, R.W.D. #)

RECEIVED
STATE CORPORATION COMMISSION
3/14/89
APR 4 1989
CONSERVATION DIVISION
Wichita, Kansas

Operator: License # 6044.....
Name Stelbar Oil Corporation, Inc.
Address 155 North Market, Suite 500
Wichita, KS 67202.....
City/State/Zip

Purchaser N/A.....

Operator Contact Person John C. Shawver.....
Phone 264-8378.....

Contractor: License # 5840.....
Name Brandt Drilling.....

Wellsite Geologist Paul M. Gerlach.....
Phone 269-2083.....

Designate Type of Completion
 New Well _____ Re-Entry _____ Workover _____
_____ Oil _____ SWD _____ Temp Abd _____
_____ Gas _____ Inj _____ Delayed Comp. _____
 Dry _____ Other (Core, Water Supply etc.) _____
If ONWO: old well info as follows:
Operator,
Well Name,
Comp. DateOld Total Depth.....

WELL HISTORY

Drilling Method:
 Mud Rotary _____ Air Rotary _____ Cable _____

11/25/88 11/30/88 11/30/88
Spud Date Date Reached TD Completion Date

3054.....
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 220 feet
Multiple Stage Cementing Collar Used? _____ Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to.....w/.....SX cmt
Cement Company Name United Cementing.....
Invoice # 2598.....
AIT 080

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log shall be attached with this form. 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 John C. Shawver.....
Title Executive Vice-President..... Date 3/13/89.....

Subscribed and sworn to before me this 13th day of March.....
1989.....
Notary Public Judy Warrior.....
Date Commission Expires April 26, 1989.....

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Drillers Timelog Received
Distribution
 KCC _____ SWD/Rep _____ NGPA
 KGS _____ Plug _____ Other
(Specify)
.....
.....
3-14-89
Form ACO-1 (5-86)

Sec 27 Twp 27 Rge 36

Operator Name Stalbar Oil Corporation, Inc. Lease Name Glen-Max Well # 1

Sec. 27 Twp. 27S Rge. 3 East West County Butler

WELL LOG

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation Description <input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample																					
DST #1 3040-3054' 15"-30"-60"-60" Rec. 370' MCW 21,000 ppm CL Hyd: 1507-1481 IF: 46-64 FF: 92-185 SIP: 1078-1067 BHT: 120°	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Bottom</th> </tr> </thead> <tbody> <tr><td>Iatan</td><td>1917'</td><td>-602</td></tr> <tr><td>Stalnaker</td><td>1965'</td><td>-650'</td></tr> <tr><td>Lansing</td><td>1983'</td><td>-668'</td></tr> <tr><td>Kansas City</td><td>2310'</td><td>-995'</td></tr> <tr><td>Mississippian</td><td>2788</td><td>-1473</td></tr> <tr><td>Simpson</td><td>3046</td><td>-1731</td></tr> </tbody> </table>	Name	Top	Bottom	Iatan	1917'	-602	Stalnaker	1965'	-650'	Lansing	1983'	-668'	Kansas City	2310'	-995'	Mississippian	2788	-1473	Simpson	3046	-1731
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CASING RECORD <input type="checkbox"/> New <input 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 1/2"	8.5/8"	20 7/8"	220'		165	3% CC 1 Sk Hulls
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)		Depth	
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of First Production		Producing Method					
N/A		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain).....					
Estimated Production Per 24 Hours	Oil	Gas	Water	Gas-Oil Ratio	Gravity		
	Bbls	MCF	Bbls		CFPB		

METHOD OF COMPLETION

Disposition of gas: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perforation <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Dually Completed <input type="checkbox"/> Commingled
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