

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

API NO. 15- 065 - 22,569 - 00-00

County GRAHAM

NW NW SW Sec. 7 Twp. 8S Rge. 24 X East West

2310 Ft. North from Southeast Corner of Section

4950 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name SANGER Well # 1

Field Name NONE

Producing Formation NONE

Elevation: Ground 2353 KB 2358

Total Depth 3950 PBDT -

Operator: License # 3869

Name: IMPERIAL OIL PROPERTIES, INC.

Address 212 N. MARKET, # 307

WICHITA, KS

City/State/Zip WICHITA, KS 67202

Purchaser: NONE

Operator Contact Person: ROBERT L. WILLIAMS, JR.

Phone (316) 265-6977

Contractor: Name: ABERCROMBIE DRILLING, INC.

License: 5422

Wellsite Geologist: CRAIG L. CAULK

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWMO: old well info as follows:

Operator: 10-11-90

Well Name: OCT 11 1990

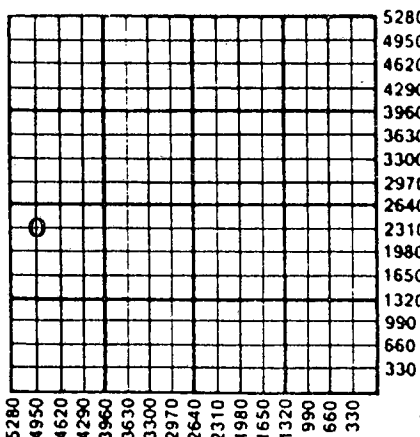
Comp. Date 5-23-90 Old Total Depth 5-29-90

Drilling Method:

Mud Rotary Air Rotary Cable

5-23-90 5-29-90 5-30-90

Spud Date Date Reached TD Completion Date



Alt II D+A

Amount of Surface Pipe Set and Cemented at 208 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.

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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Robert L. Williams, Jr.
Title PRESIDENT Date 10-10-90

Subscribed and sworn to before me this 10th day of October, 1990.

Notary Public Faye L. Braley

Date Commission Expires 4-28-91

Faye L. Braley
NOTARY PUBLIC
State of Kansas
My Appt. Exp: 4-28-91

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)

JAN 1970

SIDE TWO

Operator Name IMPERIAL OIL PROPERTIES, INC. Lease Name SANGER Well # 1

Sec. 7 Twp. 8S Rge. 24 East West County GRAHAM

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.)

Formation Description
 Log Sample
Name Top Bottom
SEE ATTACHED SHEET

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 1/4"	8 5/8"	24#	208	60/40 Poz.	150	2% gel, 3% Ca Cl2

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First Production	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)							
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)
METHOD OF COMPLETION: Open Hole Perforation Dually Completed Commingled
 Other (Specify) _____
Production Interval _____

913-483-2627, Russell, Kansas

Phone 316-793-5861, Great Bend, Kansas

15-065-22569-00-00

Phone Plainville 913-434-2812

Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC. No 8062

Home Office P. O. Box 31

Russell, Kansas 67665

New

Date	5.30.90	Sec.	7	Twp.	8	Range	24	Called Out	12:00 AM	On Location	3:00 AM	Job Start	6:15 AM	Finish	9:00 AM	
Lease	<i>Singer</i>	Well No.	1	Location				<i>Hill City S.L. 11W 2N</i>	County	<i>Graham</i>	State	<i>Kansas</i>				

Contractor	<i>Abercrombie</i>
Type Job	<i>Rotary Plug</i>
Hole Size	<i>7 7/8</i>
Csg.	Depth
Tbg. Size	Depth
Drill Pipe	<i>4 1/2 XH</i>
Tool	Depth
Cement Left in Csg.	Shoe Joint
Press Max.	Minimum
Meas Line	Displace
Perf.	

Owner *Imperial*

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.

Charge To *Imperial Oil Properties Inc.*
Street *212 N Market Suite 301*
City *Wichita* State *Ks 67202*

The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No. *X* *Marold Muley*

CEMENT

Amount Ordered	<i>190⁶⁰ / 40 poz 6% gel 3% cc 1/4" flo seal per</i>		
Consisting of			
Common	<i>114</i>	<i>5.00</i>	<i>570.00</i>
Poz. Mix	<i>76</i>	<i>2.25</i>	<i>171.00</i>
Gel.	<i>8</i>	<i>6.75</i>	<i>54.00</i>
Chloride	<i>6</i>	<i>20.00</i>	<i>120.00</i>
Quickset			
<i>Flo Seal - 48</i>	<i>.60</i>		<i>28.80</i>
Handling	<i>190</i>	<i>.90</i>	<i>171.00</i>
Mileage	<i>45</i>		<i>256.50</i>
		Sub Total	
		Total	<i>1371.30</i>

EQUIPMENT

<i>New City</i>	
No.	Cementer
<i>#158</i>	Helper
No.	Cementer <i>JAYSON</i>
<i>#101</i>	Helper <i>KRIS</i>
	Driver <i>BILL S.</i>
	Driver

OCT 11 1990
CONCRETE
PLASTER, KANSAS

DEPTH of Job	
Reference:	
<i>Pump trk charge</i>	<i>450.00</i>
<i>Mileage</i>	<i>45.00</i>
<i>1. 8 7/8 dry hole plug.</i>	<i>20.00</i>
Sub Total	
Tax	
Total	<i>515.00</i>

Remarks: *1st 250x - 2080'*
2nd 100x - 1200'
3rd 40x - 210'
4th 10x - 40'
150x in Both hole

Thank you.

Floating Equipment

TOTAL \$ *1886.30*

Disc - *377.26*

\$ 1509.04