

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

CONFIDENTIAL

API NO. 15- 141-203040000 **ORIGINAL**

Operator: License # 3956

Name: Brungardt Oil & Leasing

Address PO Box 871

City/State/Zip Russell, KS 67665

Purchaser: N/A

Operator Contact Person: Gary L. Brungardt

Phone (913) 483-4975

Contractor: Name: Shields Drilling Co., Inc.

License: 5184

Wellsite Geologist: Brad Hutchinson

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD S1OW Temp. Abd.

Gas ENHR SIGW

Dry Other (Core, MSW, Expl., Cathodic, etc)

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

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back _____ PBDT

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

10-18-95 10-26-95 10-26-95
Spud Date Date Reached TD Completion Date

County Osborne

SW - SW - NW - _____ Sec. 6 Twp. 9 Rge. 11 ^E_X ^W

2970 Feet from (S)N (circle one) Line of Section

330 Feet from (E) (circle one) Line of Section

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

Lease Name DeMoss Well # 1

Field Name Cheyenne Gap Extension

Producing Formation Lansing K-C

Elevation: Ground 1766' KB 1871'

Total Depth _____ PBDT 3420'

Amount of Surface Pipe Set and Cemented at 216' 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 cat.

Drilling Fluid Management Plan DFA 4-3-96
(Data must be collected from the Reserve Pit) AKT RV

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: KCC

RELEASED **DEC 27**

Operator Name 2-6-97

Lease Name FEB 6 1997 License No. _____

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

County FROM CONFIDENTIAL 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 Gary L. Brungardt
Title Owner Date 12-26-1995

Subscribed and sworn to before me this 26th day of December, 19 95.

Notary Public Glenda R. Phillips

Date Commission Expires Sept. 1, 1999

GLEND A. PHILLIPS
Notary Public
State of Kansas
My Appl. Exp. Sept. 1, 1999

CONSERVATION DIVISION
Wichita, Kansas
K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C _____ Geologist Report Received
Distribution
 KCC _____ SWD/Rep _____ NGPA
_____ KGS _____ Plug _____ Other
(Specify)

Operator Name Brungardt Oil & Leasing Lease Name DeMoss Well # 1
 Sec. 6 Twp. 9 Rge. 11 East County Osborne
 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.)

Log Name	Formation (Top), Depth and Datum		Sample
	Top	Datum	
Anhydrite	973	+ 898	
Topeka	2802	-931	
Heebner	3032	-1161	
Toronto	3054	-1183	
Lansing KC	3089	-1218	

List All E. Logs Run: Radiation Guard
 DST #1 3058-3105 Times: 15-15-15-Recov. 10' mud
 ISIP 225/FSIP 108 IFP 34-34 FFP 34-34
 DST #2 3095-3130 Times: 45-45-45 Rec. 330' wtr w/oil scum on top
 ISIP 1199/FSIP 1183 IFP 125-167 FFP 200-234

DST #3 3136-3146 Rec. 30' gas, 25' SO & GC Water
 5' Mud
 ISIP 1174/FSIP 1174 IFP 33-33 FFP 33-33

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		8 5/8"	28	216'	40/60 Pozmix	135	

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

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.	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 Perforated Dually Comp. Commingled Other (Specify) _____

Production Interval _____

CONFIDENTIAL

SWIFT FORMATION TESTERS

ORIGINAL

1309 VAN FLEET PHONE 793-5177

GREAT BEND, KANSAS 67530

15-141-20304

DATE 10-23-95

COMPANY BRUNGARDT Oil & Leasing Inc.

ADDRESS Box 871 Russell, Ks. 67665

LEASE Demoss WELL NO. 1 COUNTY OSborne

DEPTH 3105 TESTED FROM 3058 TO 3105 TEST NO. 1

TOOL JT. 4 1/2 FH SIZE HOLE 7 7/8 SIZE PACKER 6 3/4 MIS-RUN NO. _____

INITIAL HYD. 1441# FINAL HYD. 1430# SUCCESSFUL NO. _____

INITIAL SHUT-IN — HR. 15 MIN.: TOOL OPEN — HR. 15 MIN.: FINAL SHUT-IN — HR. 15 MIN.

INVOICES SENT TO: _____

INITIAL FLOW PERIOD 45 MINUTES

BLOW: Very Weak FOR 7 minutes

REMARKS: _____

RECOVERY: 10' mud

RELEASED
FEB 6 1997
DEC 27

FROM CONFIDENTIAL CONFIDENTIAL

INITIAL SHUT-IN PRESSURE 225# INITIAL FLOW PRESSURE 34-34# FINAL FLOW PRESSURE 34-34#

FINAL SHUT-IN PRESSURE 108# FIELD ORDER NO. _____ PRICE OF JOB #600.00

EXTRA EQUIPMENT _____ OPERATOR TIME _____

SWIFT FORMATION TESTERS

Shall not be liable for damage of any kind to the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

APPROVED BY: _____
OUR REPRESENTATIVE [Signature]

TICKET No 5920
RECEIVED
STATE CORPORATION COMMISSION
DEC 27 1995
CONSERVATION DIVISION
Wichita, Kansas

15-141-20304-00-00

SWIFT FORMATION TESTERS

ORIGINAL

1309 VAN FLEET PHONE 793-5177

GREAT BEND, KANSAS 67530

DATE 10-24-95

~~CONFIDENTIAL~~

COMPANY BRUNN GARDT Oil & Leasing Co

ADDRESS Russell Kans

LEASE Demoss WELL NO. 1 COUNTY OSBORNE

DEPTH 3130 TESTED FROM 3095 TO 3130 TEST NO. 2

TOOL JT. 4 1/2 FH SIZE HOLE 7 7/8 SIZE PACKER 6 3/4 MIS-RUN NO. _____

INITIAL HYD. 1515# FINAL HYD. 1501# SUCCESSFUL NO. _____

INITIAL SHUT-IN - HR. 45 MIN.: TOOL OPEN HR. 45 MIN.: FINAL SHUT-IN HR. 45 MIN.

INVOICES SENT TO: _____

INITIAL FLOW PERIOD 45 MINUTES RELEASED _____

BLOW: FAIR Steady THRU-OUT FEB 6 1997 DEC 27

REMARKS: _____ FROM CONFIDENTIAL

RECOVERY: 330' water w/scum oil ON TOP

INITIAL SHUT-IN PRESSURE 1199# INITIAL FLOW PRESSURE 125-167# FINAL FLOW PRESSURE 200-234#

FINAL SHUT-IN PRESSURE 1183# FIELD ORDER NO. _____ PRICE OF JOB \$600⁰⁰

EXTRA EQUIPMENT _____ OPERATOR TIME _____

SWIFT FORMATION TESTERS

Shall not be liable for damage of any kind to the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

APPROVED BY: _____

OUR REPRESENTATIVE [Signature]

TICKET No 5921

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STATE CORPORATION COMMISSION

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CONSERVATION DIVISION
Wichita, Kansas

15-141-20304-00-00

SWIFT FORMATION TESTERS

1309 VAN FLEET PHONE 793-5177
GREAT BEND, KANSAS 67530

ORIGINAL

CONFIDENTIAL

DATE 10-24-95

COMPANY BRUNGARDT Oil + Leasing Co.

ADDRESS Russell Ks.

LEASE Demoss WELL NO. 1 COUNTY Osborne

DEPTH 3146 TESTED FROM 3136 TO 3146 TEST NO. 3

TOOL JT. 4 1/2 FH SIZE HOLE 7 7/8 SIZE PACKER 6 3/4 MIS-RUN NO. _____

INITIAL HYD. 1482# FINAL HYD. 1470# SUCCESSFUL NO. _____

INITIAL SHUT-IN HR. 45 MIN.: TOOL OPEN HR. 45 MIN.: FINAL SHUT-IN HR. 45 MIN.

INVOICES SENT TO: _____

INITIAL FLOW PERIOD 45 MINUTES

BLOW: Weak INTERMITTENT THRU-OUT

REMARKS: Flushed Tool

RECOVERY: 5' MUD
25' 50% GC Water
30' GAS ABOVE FLUID

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CONFIDENTIAL

INITIAL SHUT-IN PRESSURE 1174# INITIAL FLOW PRESSURE 33-33# FINAL FLOW PRESSURE 33-33#

FINAL SHUT-IN PRESSURE 1174# FIELD ORDER NO. _____ PRICE OF JOB \$600.00

EXTRA EQUIPMENT _____ OPERATOR TIME _____

SWIFT FORMATION TESTERS

Shall not be liable for damage of any kind to the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

APPROVED BY: _____

OUR REPRESENTATIVE *Jason Call*

TICKET No 5922
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CONSERVATION DIVISION
Wichita, Kansas

CUSTOMER COPY



HALLIBURTON

ORIGINAL

REMIT TO

P.O. BOX 951046
DALLAS TX 75395-1046

INVOICE

INVOICE NO. 906703 DATE 11/13/1995

WELL LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	OWNER
DEMOSSE B I	OSBORNE	KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE
PRATT	SHIELDS DRILLING	PLUG TO ABANDON	10/26/1995
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER
002048	HURTON BEERY		
		SHIPPED VIA	FILE NO.
		COMPANY TRUCK	99424

GARY BRUNGARDT
DBA BRUNGARDT OIL & LEASING CO
529 E. 14TH, BOX 871
RUSSELL, KS 67665

NOV
DEC 27
CONFIDENTIAL

DIRECT CORRESPONDENCE TO:
P.O. BOX 1598
LIBERAL, KS 67905-0000

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE CEMENTING ROUND TRIP	140	MI	2.85	399.00
		1	UNT		
090-910	MISCELLANEOUS PUMPING JOB	1	TRK	395.00	395.00
504-136	CEMENT - 40/60 POZMIX STANDARD	200	SK	7.16	1,432.00
507-277	HALLIBURTON-GEL BENTONITE	7	SK	18.60	130.20
500-207	BULK SERVICE CHARGE	200	CFT	1.35	270.00
500-306	MILEAGE CMTG MAT DEL OR RETURN	630.48	TMI	.95	598.96

INVOICE SUBTOTAL

3,225.16

DISCOUNT-(BID)

1,064.29-

INVOICE BID AMOUNT

2,160.87

JOB ADJUSTMENT(S)

330.00-

*-KANSAS STATE SALES TAX

89.70

*-PRATT COUNTY SALES TAX

18.30

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DEC 27 1995

CONSERVATION DIVISION
Wichita, Kansas

INVOICE TOTAL - PLEASE PAY THIS AMOUNT \$1,938.87

TERMS: If Customer does not have an approved open account with Halliburton, all sums due are payable in cash at the time of performance of services or delivery of equipment, products or materials. If customer has an approved open account, invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest



INVOICE

INVOICE NO.	DATE
640040	10/19/1995

WELL/LEASE NO./PROJECT	WELL/PROJECT LOCATION	STATE	OWNER
DEMOS	OSBORNE	KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE
HAYS	SHIELDS DRILLING	CEMENT SURFACE CASING	10/19/1995
ACGT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER PO NUMBER
002088	BURTON BEERY		
		SHIPPED VIA	FILE NO.
		COMPANY TRUCK	98155

GARY BRUNGARDT
 DBA BRUNGARDT OIL & LEASING CO
 529 E. 14TH, BOX 871
 RUSSELL, KS 67665

DIRECT CORRESPONDENCE TO
 P.O. BOX 1598
 LIBERAL, KS 67905-0000

DEC 27

REFERENCE NO.	DESCRIPTION	QUANTITY	UM	UNIT PRICE	AMOUNT
000-117	MILEAGE CEMENTING ROUND TRIP	100 MI		2.85	285.00
001-016	CEMENTING CASING	219 FT		585.00	585.00
030-503	TOP WOODEN PLUG	8 5/8 IN		95.00	95.00
504-136	CEMENT - 40/60 POZMIX STANDARD	135 SK		7.16	966.60
506-121	HALLIBURTON-GEL 2%	200 LB		.00	N/C
509-406	ANHYDROUS CALCIUM CHLORIDE	3 SK		36.75	110.25
500-207	BULK SERVICE CHARGE	141 CFT		1.35	190.35
500-306	MILEAGE CMTG MAT DEL OR RETURN	283.363 TMI		.95	269.19

INVOICE SUBTOTAL

2,501.39

DISCOUNT - (BID)

903.43-

INVOICE BID AMOUNT

1,597.96

* KANSAS STATE SALES TAX

51.11

* HAYS CITY SALES TAX

10.43

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6 1997

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STATE CORPORATION COMMISSION

DEC 27 1995

CONSERVATION DIVISION
Wichita, Kansas

INVOICE TOTAL - PLEASE PAY THIS AMOUNT ***** \$1,659.50

TERMS: If Customer does not have an approved open account with Halliburton, all sums due are payable in cash at the time of performance of services or delivery of equipment, products or materials. If customer has an approved open account, invoices are payable on the twentieth day after date of invoice. Customer agrees to pay interest on any unpaid balance from the date payable until paid at the highest lawful contract rate applicable, but never to exceed 18% per annum. In the event Halliburton employs an attorney for collection of any account, Customer agrees to pay attorney fees of 20% of the unpaid account, plus all collection and court costs.