

ORIGINAL

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

Operator: License # 7644
Name: Bob Miller
Address 2061 Independence Rd.
Unit 23
City/State/Zip Sedan, Ks. 67361
Purchaser: Farmland
Operator Contact Person: Bob Miller
Phone 316,725-3917
Contractor: Name: McPherson
License: 5495
Wellsite Geologist: none
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
Deepening _____ Re-perf. _____ Conv. to Inj/SWD
Plug Back _____ PBTD _____
Commingled _____ Docket No. _____
Dual Completion _____ Docket No. _____
Other (SWD or Inj?) Docket No. _____
11-5-00 11-7-00 11-17-00
Spud Date Date Reached TD Completion Date

API NO. 15- 019-26-541-00-00
County Chautauqua
NE $\frac{1}{4}$ NE $\frac{1}{4}$ SE $\frac{1}{4}$ Sec. 26 Twp. 33 Rge. 11 E
2350 Feet from N (circle one) Line of Section
520 Feet from W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Gardner Well # 24
Field Name Sedan
Producing Formation Wayside
Elevation: Ground approx. 990 KB _____
Total Depth 1187 PBTD _____
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from surface
feet depth to 1287 w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content unknown ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W _____
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 30 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 Bob Miller
Title Owner Date 12/2/00
Subscribed and sworn to before me this 2 day of December
19 2000
Notary Public Sue Stidham
SUE STIDHAM
NOTARY PUBLIC
STATE OF KANSAS
Date Commission Expires 4-12-2001

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 Bob Miller

Lease Name Gardener Well # 24

Sec. 26 Twp. 33 Rge. 11
 East
 West

County Chautauqua

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.)

List All E.Logs Run:

Log Formation (Top), Depth and Datum Sample
 Name Top Datum
 see log

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	10"	8"	unknown	40	see attached cement ticket		
Production	6 3/4"	4 1/2"	9 1/2 lb.	1198			

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
1 shot/15"	Wayside	1126-1158	Fracture	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8	1147	none	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <input checked="" type="checkbox"/>	Bbls. 3	Gas Mcf	Water <input checked="" type="checkbox"/>	Bbls. 30 Gas-Oil Ratio Gravity 34

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

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

Production Interval: 1126-1158



CONSOLIDATED
INDUSTRIAL
SERVICES
 AN INFINITY COMPANY
 211 W. 14TH STREET, CHANUTE, KS 66720
 316-431-9210 OR 800-467-8676

ORIGINAL

TICKET NUMBER **16797**

LOCATION Bartlesville

FIELD TICKET

DATE 11-2-00	CUSTOMER ACCT # 5237	WELL NAME Gardner #24	QTR/QTR	SECTION	TWP	RGE	COUNTY Chautauque	FORMATION
CHARGE TO M. Her Oil Co.				OWNER				
MAILING ADDRESS Rt 2 Box 58C				OPERATOR				
CITY & STATE Sedan, KS 67361				CONTRACTOR				

APJ 15-019-26541-06-00

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE Production Casing		525.00
5402	1206'	HYDRAULIC HORSE POWER		156.78
1105	2 sks	Cotton seed Hulls		24.20
1107	2 sks	Flo Seal		70.50
1110	30 sks	Gilsonite		552.00
1111	11 sks	Granulated Salt		110.00
1112	9 sks	Premium Gel		99.00
4404	1	4 1/2" Rubber Plug		27.30
		STAND BY TIME		
		MILEAGE		
5501	3 1/2 hrs	WATER TRANSPORTS		245.00
		VACUUM TRUCKS		
		FRAC SAND		
1104	155 sks	CEMENT		1333.00
			Tax	120.00
		NITROGEN		
5407	min	TON-MILES		175.00

NSCO #15087

ESTIMATED TOTAL **3402.11**
3439.66

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Jerry L. Williams

CUSTOMER or AGENT (PLEASE PRINT)

DATE

1169972