

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 6236
Name: MTM Petroleum, Inc.
Address: PO Box 82
City/State/Zip: Spivey KS 67142
Purchaser: _____
Operator Contact Person: Marvin A. Miller
Phone: (316) 532-3794
Contractor: Name: Shawnee Well Service, Inc.
License: 30346

Wellsite Geologist: _____
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: Champlin Petroleum Co.

Well Name: Latta 7-B
Original Comp. Date: 3-13-86 Original Total Depth: 3800'

____ Deepening Re-perf. _____ Conv. to Enhr./SWD
____ Plug Back _____ Plug Back Total Depth
____ Commingled _____ Docket No. _____
____ Dual Completion _____ Docket No. _____
____ Other (SWD or Enhr.?) _____ Docket No. _____

<u>1-15-01</u>	<u>1-17-01</u>
Spud Date or Recompletion Date	Date Reached TD Completion Date or Recompletion Date

API No. 15 - 191-21,922-000/1
County: Sumner
E2 SE SW NW Sec. 9 Twp. 30 S. R. 2 East West
2310' FNL feet from S (N) (circle one) Line of Section
1155' FWL feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: LATTA B Well #: 7
Field Name: LATTA FIELD

Producing Formation: KANSAS CITY LIME
Elevation: Ground: 1339 Kelly Bushing: 1348
Total Depth: 3800 Plug Back Total Depth: 3745'
Amount of Surface Pipe Set and Cemented at 539 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.

Drilling Fluid Management Plan OWWO RGR 7/19/07
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name: _____

Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. _____
County: _____ Docket No.: _____

RECEIVED
STATE CORPORATION COMMISSION
FEB - 6 2001

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market C. Room 2078, 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 of 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: Marvin A. Miller
Title: President Date: _____

Subscribed and sworn to before me this 5th day of February, 2001

Notary Public: Kathy Hill
Date Commission Expires: 01-04-2003

KATHY HILL
Notary Public - State of Kansas
My Appt. Expires 01-04-03

KCC Office Use ONLY
____ Letter of Confidentiality Attached
If Denied, Yes Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: MTM Petroleum, Inc. Lease Name: LATTA B Well #: 7
 Sec. 9 Twp. 30 S. R. 2 East West County: Sumner

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------

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

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				

RECEIVED
 STATE CORPORATION COMMISSION
 FEB - 6 2001

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
4DP SPF	3248-3254'	750 gal 15% NE @ 3 bpm @	1750#
4DP SRP	3206-3218'	1500 gal 15% NE @ 2 bpm @	2000#
4DP SHP	3140-3146'	750 gal 15% NE @ 3 bpm @	1900#
4DP SPF	3058-3062'	500 gal 15% NE @ 3 bpm @	1700#
	CIBP set @ 3358'		

TUBING RECORD		Size Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.		Producing Method		
1-17-01		<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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Sumit ACO-18.) Other (Specify) _____