

SIDE ONE

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

Operator: License # 4629

Name: Brito Oil Company

Address 200 E. First, Suite 208

City/State/Zip Wichita, KS 67202

Purchaser: NA

Operator Contact Person: Raul F. Brito

Phone (316) 263-8787

Contractor: Name: Blue Goose Drilling

License: 5104

Wellsite Geologist: Raul F. Brito

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OMMO: old well info as follows:

Operator: _____

Well Name: NA

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

3/13/90 3/21/90 3/21/90

Spud Date Date Reached TD Completion Date

API NO. 15- 193-20,508-0000

County Thomas

N/2 NW SE Sec. 21 Twp. 9S Rge. 32 East West

2310 Ft. North from Southeast Corner of Section

1980 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

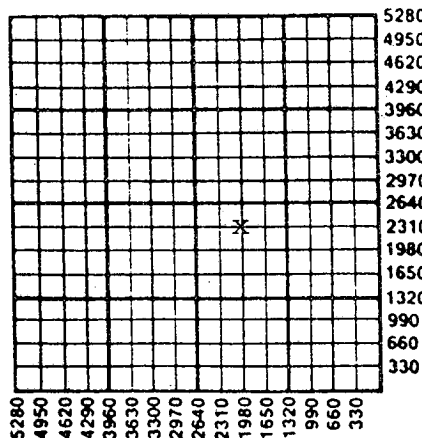
Lease Name Renner Well # 2-21

Field Name OHL NW

Producing Formation NA

Elevation: Ground 3987 KB 3094

Total Depth 4720 PBTD NA



RECEIVED
STATE CORPORATION COMMISSION

MAR 26 1990
03-26-1990
CONSERVATION DIVISION
Wichita, Kansas

Amount of Surface Pipe Set and Cemented at: 268 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 _____

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-111 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.

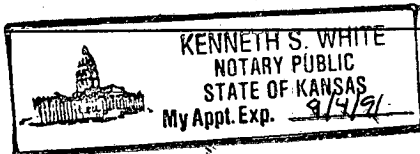
Signature [Signature]

Title President Date 3/26/90

Subscribed and sworn to before me this 26th day of March, 19 90.

Notary Public Kenneth S. White

Date Commission Expires _____



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Drillers Timelog Received

KCC SWD/Rep NGPA

KGS Plug Other (Specify)

Form ACO-1 (7-89)
ORIGINAL

SIDE TWO

Operator Name Brito Oil Company, Inc. Lease Name Renner Well # 2-21
 Sec. 21 Twp. 9S Rge. 32 East West
 County Thomas

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.)

DST #1 4350-4380 (LKC "L")
 30-30-30-30, IF: VWK 1/4" b1, died in
 28", FF: No Blow, Rec. 5' Mud, IFP
 51-51#, ISIP 51#, FFP 51-51#, FSIP
 51#, 107^o, IHP 2184#, FHP 2002#

| Formation Description | | |
|-----------------------|--------------|--------|
| Name | Top | Bottom |
| Anhy | 2673 (+421) | |
| B/Anhy | 2704 (+390) | |
| Heeb | 4062 (-968) | |
| Lans | 4102 (-1008) | |
| Stark | 4321 (-1227) | |
| Marm | 4402 (-1308) | |
| Paw | 4505 (-1411) | |
| Ft Scott | 4567 (-1473) | |
| Miss | 4690 (-1596) | |

| 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 1/4" 8 5/8" | 8 7/8" | 20 [#] | 268' | 60/40 PDS | 160 | 2% Gel |
| 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 | | | |
| Size | Set At | Packer At | | | | | |
| 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 _____

ORIGINAL