

Plugged 17-9-90

ORIGINAL

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 # 5205
Name: Mid-Continent Energy Corporation
Address: 155 N. Market, Suite 200
Wichita, Kansas 67202
City/State/Zip _____

Purchaser: _____
Operator Contact Person: Bradley R. Buehler
Phone (316) 265-9501

Contractor: Name: Lloyd Drilling Co.
License: 3300

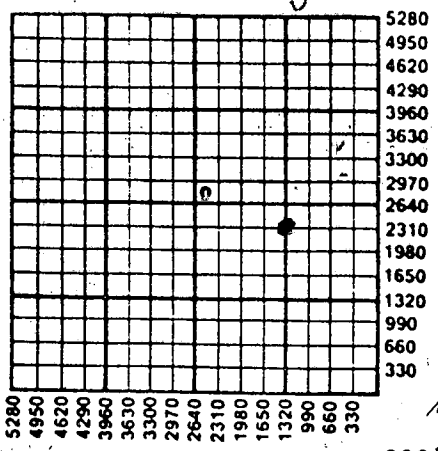
Wellsite Geologist: Joel A. Alberts

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: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable
7-3-90 7-9-90 7-9-90
Spud Date Date Reached TD Completion Date

API NO. 15- 179-20,964-00-00
County Sheridan
N $\frac{1}{2}$ N $\frac{1}{2}$ SE $\frac{1}{4}$ Sec. 8 Twp. 9-S Rge. 26 East West
2310 Ft. North from Southeast Corner of Section
1320 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)
Lease Name SHATZELL FARMS Well # 1
Field Name NA Wildcat
Producing Formation None D & A
Elevation: Ground 2603 KB 2613
Total Depth 4006' PBTD _____



Amount of Surface Pipe Set and Cemented at 232' 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 Bradley R. Buehler
Title Vice-President Date 9-17-90

Subscribed and sworn to before me this 17 day of Sept., 1990.

Notary Public Gayle Nye
Date Commission Expires _____
GAYLE NYE
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 6-8-91

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 Plug Other
(Specify)
SEP 18 1990
09-18-1990

SIDE TWO

Operator Name MID-CONTINENT ENERGY CORPORATION Lease Name SHATZELL FARMS Well # 1
 Sec. 8 Twp. 9-S Rge. 26 East West County SHERIDAN

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 3732 - 3772 45"-45"-30"-30"
 REC. 10' drilling mud W/oil specs
 IFP880 FFP 80; ISIP 1210 FSIP 1164

Formation Description		
Name	Top	Bottom
Anhydrite	2198	+415
Heebner	3734	-1119
Toronto	3758	-1143
Lansing	3774	-1159
BKC	4002	-1387
Total Depth	4006	-1391

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	20#	232'	60/40	145	2% gel @% CC
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			
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 _____