

ORIGINAL

SIDE ONE

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

API NO. 15-065-22,591-60-00

County Graham

C E/2 NW SW Sec. 36 Twp. 10S Rge. 24 X East West

1980 Ft. North from Southeast Corner of Section

4290 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

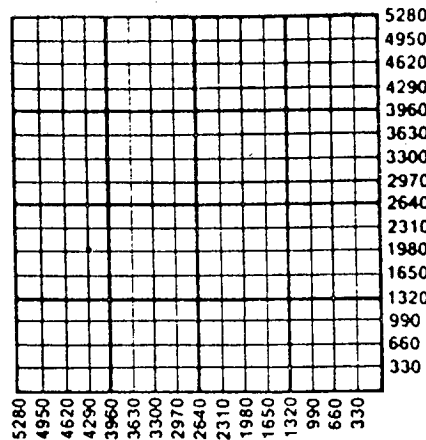
Lease Name Ruder Well # 2

Field Name Geyer East

Producing Formation _____

Elevation: Ground 2355' KB 2360'

Total Depth 4000' PBDT _____



Oil Dry

Amount of Surface Pipe Set and Cemented at 211 Feet

Multiple Stage Cementing Collar Used? _____ Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Operator: License # 30287

Name: Norwood Oil Company

Address 6602 Dublin Loop W. #1

City/State/Zip Colorado Springs, CO 80918

Purchaser: _____

Operator Contact Person: Clyde R. Norwood

Phone (719)-260-8049

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Jim Stiedly

Designate Type of Completion

X New Well _____ Re-Entry _____ Workover

_____ Oil _____ SWD _____ Temp. Abd.

_____ Gas _____ Inj _____ Delayed Comp.

X Dry _____ Other (Core, Water Supply, etc.)

If OWMO: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

X Mud Rotary _____ Air Rotary _____ Cable

9-27-90 10-3-90

Spud Date Date Reached TD Completion Date

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.

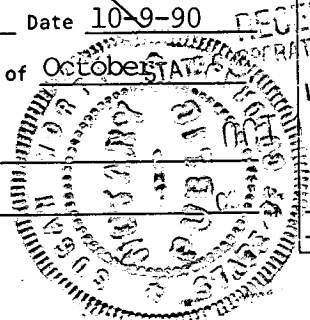
Signature Clyde R. Norwood

Title President Date 10-9-90

Subscribed and sworn to before me this 10 day of October 19 90.

Notary Public Susan D. West

Date Commission Expires 10-19-91



K.C.C. OFFICE USE ONLY

Letter of Confidentiality Attached _____

Wireline Log Received _____

Drillers Timelog Received _____

Distribution

_____ KCC _____ NGPA

_____ KGS _____ Other

(Specify)

10-15-90

5 1990

81

SIDE TWO

Operator Name Norwood Oil Company Lease Name Ruder Well # 2
 Sec. 36 Twp. 10S Rge. 24 East West
 County Graham

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.)

Formation Description

Log Sample

Name _____ Top _____ Bottom _____

See Attached Drillers Log.
 I have also sent a copy of the geologist report on the well detailing zones.

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	8-5-8" 12 1/4" OLN	8-5-8"		211'	See Attached sheets 60/40 POZ	145	29661 39cc
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 _____

