ORIGINAL

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS	API NO. 15- 193-20,522 - 80-00 County Thomas				
OIL & GAS CONSERVATION DIVISION					
MELL COMPLETION FORM ACO-1 MELL HISTORY	t tast				
DESCRIPTION OF WELL AND LEASE	NE NE NW Sec. 10 Twp. 10S Rge. 31 x West				
perator: License # 4629	4950 Ft. North from Southeast Corner of Section				
Name: Brito Oil Company, Inc.	2970 Ft. West from Southeast Corner of Section				
Address 200 E. First, Suite 208	(NOTE: Locate well in section plat below.)				
	Lease Name Robben Well # 1-10				
City/State/Zip Wichita, KS 67202	Field Name W.C.				
urchaser:	Producing Formation Lansing-Mississippi 2948 2953				
perator Contact Person: Raul Brito	Elevation: Ground 2948 KB 2953				
Phone (316) 263-8787	Total Depth				
Contractor: Name: Abercrombie Drilling, Inc.	4950 4620				
License: 5422 STATE GORPY	ECEIVED 4290 3960				
	TRATION COMMISSION 3630				
JUL	2 3 1990 2970 2970 2970 2310 N				
Designate Type of Completion X New Well Re-Entry Workover CONSERVA	AV/(M) (50/m)				
Oil	ta, Kansas 1320				
Gas Inj Delayed Comp. X Dry Other (Core, Water Supply, etc.)	660				
If OWWO: old well info as follows:	A 17 II				
Operator:	Amount of Surface Pipe Set and Cemented at Fee				
Well Name:					
Comp. Date Old Total Depth	Multiple Stage Cementing Collar Used? Yes				
Drilling Method: Air Rotary Cable	If yes, show depth setFee				
7-7-90 7-13-90 7-14-90	If Alternate II completion, cement circulated from				
Spud Date	feet depth to w/ sx cmt				
INSTRUCTIONS: This form shall be completed in triplicate	and filed with the Kansas Corporation Commission, 200 Colorado as of the soud date of any well. Rule 82-3-130, 82-3-107 and				
Derby Building, Wichita, Kansas 67202, within 120 day 82-3-106 apply. Information on side two of this form will	be held confidential for a period of 12 months if requested in				
to see and authorized with the form See Fille XX-5	(-10) for confidentiality in excess of it months. One dept of the				
luireline logs and drillers time log shall be attached with	this form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-				
form with all plugged wells. Submit CP-111 form with conversion of a wett requires filing of ACO-2 within 120 d					
All requirements of the statutes, rules and regulations prom with and the statements herein are complete and correct to	ulgated to regulate the oil and gas industry have been fully compli- the best of my knowledge.				
Signature	K.C.C. OFFICE USE ONLY F Letter of Confidentiality Attached				
	7-20-90 C Wireline Log Received C Drillers Timelog Received				
Subscribed and sworn to before me this 20^{12} day of 1990 .	Distribution				
Notary Public Hamell S. While	KCCSWD/RepNGPA				
Notary Public Amel The D. William	KGS Plug Other				

NOTARY PUBLIC STATE OF KANSAS My Appt. Exp. 9/4/9/

Date Commission Expires

Other (Specify)

Form ACO-1 (7-89)

ORIGINAL

SIDE TWO

Operator NameB:	rito Oil C	o., Inc.	Lease Nam	Robb	en	Well #	1-10		
10 * 10	S n== 31	☐ _{East}	County	Thomas	····				
ес. 10 тыр. 10:	5 Rge31	X West							
nterval test e d, tim	ne tool open a s, bottom hole	and base of formation and closed, flowing a temperature, fluid re opy of log.	ind shut-in pre	ssures, when	ther shut-in pro	essure rea	ched static leve		
orill Stem Tests Taken XX Yes No (Attach Additional Sheets.)				Formation Description					
amples Sent to Geol					☑ Log □	Sample			
ores Taken	Taken Yes No		Name	Name Top Bottom					
Electric Log Run (Submit Copy.) DST#1 4255-85/30"-30"-30"-30", Rec: 2' Mud, IFP's 25-25# FFP's 25-25# SIP's 25-25#		Anhyd B/Anh Topek Heebn Lansi Munci Stark BKC Marm	y a er ng e Crk	2535 2566 3612 3966 4009 4138 4222 4283 4312	Paw FS Chei Miss LTD				
urpose of String	Report a Size Hole Drilled	Size Casing Set (In O.D.)	New L tor, surface, i		Type of Cement	# Sacks Used	Type and Percen		
Surface	. 12½	8 5/8	20#	250	60/40 pozm	ix 160	3% cc, 2% c		
	:								
Shots Per Foot	PERFORATION Specify Footag	PRECORD ge of Each Interval Po	erforated		Fracture, Shot, ad Kind of Mater		Depth		
UBING RECORD	Size	Set At	Packer At	Liner Run					
ate of First Produc	tion Producir	g Method Flowing	Pumping G	s Lift 🗆	Other (Explain)	No			
stimated Production Per 24 Hours		Bbls. Gas	Mcf Wate		Gas-Oil	Ratio	Gravity		
sposition of Gas:	, ,,, ,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,	MET	HOD OF COMPLETS	ON		P	roduction Interva		
Vented Sold (If vented, sub	Used on L mit ACO-18.)				Dually Completed	Comm	ingl ed		
		— other	(Specify)		···	_	<u> </u>		