

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- 179-21, 006-00-00

County Sheridan

NW SW NE Sec. 34 Twp. 10S Rge. 30W East West

3630 Ft. North from Southeast Corner of Section

4950 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Rueschhoff Well # 1

Field Name W.C.

Producing Formation None

Elevation: Ground 2942' KB 2947'

Total Depth 4675' PBD

Operator: License # 3372

Name: Morrison-Dixon Oil Operations, Inc.

Address 100 N. Main
Suite 801

City/State/Zip Wichita, KS 67202

Purchaser: _____

Operator Contact Person: Michael Dixon

Phone (316) 264-9632

Contractor: Name: Murfin Drilling Company, Inc.

License: 30606

Wellsite Geologist: Micheal W. Dixon

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 _____

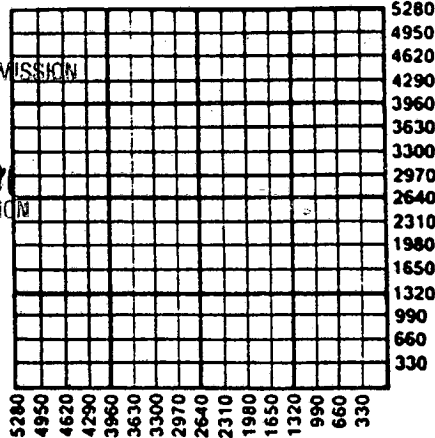
Drilling Method:

Mud Rotary Air Rotary Cable

06-05-91 06-11-91 06-12-91

Spud Date Date Reached TD Completion Date

RECEIVED
STATE CORPORATION COMMISSION
AUG 30 1991
08-30-1991
CONSERVATION DIVISION
Wichita, Kansas



Amount of Surface Pipe-Set and Cemented at 255 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 [Signature]

Title Micheal W. Dixon Vice-President Date 6-26-91

Subscribed and sworn to before me this 26 day of June, 1991.

Notary Public [Signature]

NOTARY PUBLIC - State of Kansas
VICCIE LORTZ
My Appt. Exp. 6-12-95

Date Commission Expires _____

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

SIDE TWO

Operator Name Morrison-Dixon Oil Operations, Inc. Lease Name Rueschhoff Well # 1

Sec. 34 Twp. 10S Rge. 30W
 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 4132-4280: 30-30-30-30, Rec. 15'M,
 IFP 106-106#, FFP 106-106#
 ISIP 266# FSIP 213#

DST #2 4485-4600': 30-45-45-60, Rec. 630'MW
 IFP 213-266# FFP 319-340#
 ISIP 627# FSIP 595#

Formation Description			
Name	Top	Bottom	
An	2484	+463	
B/An	2514	+433	
Hb	3966	-1019	
Lans	4004	-1057	
Stk	4218	-1271	
B/Kc	4272	-1325	
Paw	4400	-1453	
Ft. Scott	4473	-1526	
Chero.	4503	-1556	
Miss.	4646	-1699	

CASING RECORD <input checked="" 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"		255'	60/40 Poz	175	2% gel, 3% c
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 _____