

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

Operator: License # 31561

Name: C & K Oil Company

Address P.O. Box 531

City/State/Zip Claflin, Kansas 67525

Purchaser: _____

Operator Contact Person: Chris Hoffman

Phone (316) 786-0644

Contractor: Name: Vonfeldt Drilling, Inc.

License: 9431

Wellsite Geologist: Jim Musgrove

Designate Type of Completion

New Well Re-Entry Workover
 Oil SWD SIOW Temp. Prod.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathod etc)

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back _____ PBTB
 Commingled _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj?) _____ Docket No. _____

10-22-00 10-29-00 10-29-00
Spud Date Date Reached TD Completion Date

API NO. 15- 009-24687-00-00 ORIGINAL

County Barton

60 E
- NW - NW - SE Sec. 15 Twp. 17S Rge. 11 E
W

2310 Feet from SN (circle one) Line of Section

2250 Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Wenz Well # 16

Field Name Kraft-Prusa

Producing Formation _____

Elevation: Ground 1839 KB 1844

Total Depth 3308 PBTB _____

Amount of Surface Pipe Set and Cemented at 387' Feet

Multiple Stage Cementing Collar Used? _____ Yes No

If alternate II completion, cement circulated from _____ Feet

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan P+A KGR 7/18/07
(Data must be collected from the Reserve Pit)

Chloride content 55,000 ppm Fluid volume 1600 bbls

Dewatering method used Allow to dry and backfill

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 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 geologist well report 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.

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 Chris Hoffman
Title OWNER Date 12-13-00

Subscribed and sworn to before me this 13th day of December, 192000.

Notary Public Karlynn K Beck

Date Commission Expires 9-28-02

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

KARLYNN K. BECK
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 9-28-02

SIDE TWO

Operator Name C+K OIL

Lease Name WENZ Well # 16

Sec. 15 Twp. 17 Rge. 11
 East
 West

County BARTON

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 (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ANHYDRITE	652	+1182
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	TOPEKA	2600	-756
List All E.Logs Run:		HEEBNER	2897	-1053
		BROWN LIME	3000	-1156
		LANSING	3017	-1173
		CONGLOMERATE	3270	-1426
		ARBUCKLE	3288	-1444
		R.T.D.	3308	-1464

CASING RECORD
 New 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"	24	387'	60/40 Poz	200	3% CC, 2% GEL

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth

TUBING RECORD

Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SMD or Inj. _____ Producing Method Flowing Pumping Gas Lift 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 Perf. Dually Comp. Conmingled _____

Production Interval: Other (Specify) _____

DRILL-STEM TEST DATA

Well Name	Wenz	Test No.	1
Well Number	16	Zone Tested	Arb
Company	C & K Oil Company	Date	10/28/00
Comp. Rep.	J Musgrove	Tester	Don Fabricius
Contractor	Vonfeldt Drlg	Ticket No.	3376
Location	15-17-11	Elevation	

Recorder No. 3088 Clock Range 12 Recorder No. 4377 Clock Range 12
 Depth 3300 Depth 3304
 Initial Hydro Mud Press. 1669 Initial Hydro Mud Press. 1672
 Initial Shut-in Press. 70 Initial Shut-in Press. 70
 Initial Flow Press. 35-35 Initial Flow Press. 35-35
 Final Flow Press. 35-35 Final Flow Press. 35-35
 Final Shut-in Press. 58 Final Shut-in Press. 58
 Final Hydro Mud Press. 1669 Final Hydro Mud Press. 1672
 Temperature _____ Tool Open Before I. S. I. _____ Mins.
 Mud Weight 9.3 Viscosity 48 Initial Shut-in _____ Mins.
 Fluid Loss 8.8 Flow Period _____ Mins.
 Interval Tested 3260-3308 Final Shut-in _____ Mins.
 Top Packer Depth 3255 Surface Choke Size _____
 Bottom Packer Depth 3260 Bottom Choke Size _____
 Total Depth 3308 Main Hole Size _____
 Drill Pipe Size 4 1/2 X H Wt. 16.60 Rubber Size _____
 Drill Collar I. D. _____ Ft. Run _____
 Recovery—Total Feet _____
 Recovered 2 Feet Of Mud
 Recovered _____ Feet Of _____
 Recovered _____ Feet Of _____
 Recovered _____ Feet Of _____

Remarks
Very weak blow dead in 9 min
Flush tool on second open-surge

THIS ORDER MUST BE SIGNED BEFORE WORK IS COMMENCED. CONDITIONS: It is expressly understood and agreed that the above described work shall be done under the exclusive control, direction and supervision of the owner or contractor. As a part of the consideration for this agreement, it is expressly understood and agreed that Arrow Testing Company shall not be responsible for damages or losses of any kind whatsoever occasioned by or incident to the use of the above described Tools, whether run or operated by customer, or by anyone employed directly or indirectly by Arrow Testing Company, nor whether resulting from the acts or omissions of Arrow Testing Company, or any of its agents, servants or employees in any way connected with or related to the use of such Tools.
 It is expressly understood and agreed that Arrow Testing Company, shall not be bound by any agreement, not herein contained, and no agent or representative connected with or employed by Arrow Testing Company has authority to alter or extend the terms of this agreement. I have read and understand the terms of this agreement and represent that I am authorized to sign the same as agent of customer.

ORIGINAL

DRILLERS WELL LOG

Date Commenced: October 22, 2000
Date Completed: October 29, 2000

C & K Oil Company
Wenz #16
NW NW SE Sec. 15-17S-11W
Barton County, Kansas

Elevation: 1839' G.L.
1844' K.B.

0 - 662' Shale
662 - 682' Anhydrite
682 - 1310' Shale
1310 - 2045' Shale & Lime
2045 - 2640' Lime & Shale
2640 - 2755' Shale & Lime
2755 - 3224' Lime & Shale
3224 - 3284' Lime
3284 - 3308' Shale & Lime
3308' R.T.D.

FORMATION DATA

Anhydrite 662'
Base Anhydrite 682'

Surface Pipe: Set 23#, used, 8 5/8"
casing @ 385' with 200 sacks 60/40
Poz., 2% Gel., 3% CC.

AFFIDAVIT

STATE OF KANSAS)
) ss:
COUNTY OF RUSSELL)

Alan Vonfeldt of lawful age, does swear and state that the facts and statements
herein are true and correct to the best of his knowledge.

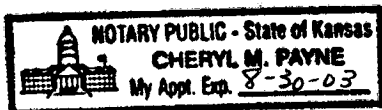
Alan Vonfeldt
Alan Vonfeldt

Subscribed and sworn to before me this 30th day of October, 2000.

My Commission Expires:

August 30, 2003

Cheryl M. Payne
Cheryl M. Payne, Notary Public



ALLIED CEMENTING CO., INC. 4348

ORIGINAL

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT

Mr Bond

DATE 10-23-00	SEC 15	TWP 17	RANGE 11	CALLED OUT 2:30 AM	ON LOCATION 4:30 AM	JOB START 5:30 AM	JOB FINISH 6:00 AM
LEASE Wanz		WELL# 16	LOCATION Chaplin 3N, 1E, 1/2N, W/5			COUNTY Barton	STATE Ka
OLD OR NEW (Circle one)							

CONTRACTOR **Vonfeldt Dely**

TYPE OF JOB **Supply**

HOLE SIZE **12 1/8"** T.D. **387'**

CASING SIZE **8 7/8"** DEPTH **387'**

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. **15'**

PERFS. _____

DISPLACEMENT **23 1/4 bbls**

OWNER **Same**

CEMENT AMOUNT ORDERED **200 lbs 60/40 3% CC, 2% Mel.**

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____

TOTAL _____

EQUIPMENT

PUMP TRUCK CEMENTER **Tom D**

181 HELPER **Bob B**

BULK TRUCK _____

342 DRIVER **Steve T**

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

Ran 387' of 8 7/8" hole size. Mixed 200 lbs 60/40 3% CC 2% Mel. Released Plug. Displaced with fresh H₂O.

SERVICE

DEPTH OF JOB **387'**

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG **1-8 7/8" TWP** _____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: **C & K Oil Co.**

STREET **P.O. Box 531**

CITY **Chaplin** STATE **Ka** ZIP **67625**

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE *[Signature]*

[Signature] PRINTED NAME

ALLIED CEMENTING CO., INC. 7565

ORIGINAL

REMIT TO: P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

Matt Bond

DATE	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
10 29 60	15	17	11	9 30 PM	12:00 AM	1:00 AM	6:45 AM
LEASE	WELL #	LOCATION	COUNTY	STATE			
<u>Wing</u>	<u>110</u>	<u>Claflin 3 N 1 E 1/2 N</u>	<u>West into</u>	<u>Kansas</u>			
OLD OR NEW (Circle one)							

CONTRACTOR Vonfeldt Drilling
 TYPE OF JOB Arbuckle Plug
 HOLE SIZE 7 7/8 T.D. 3308
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 DEPTH 3280
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER CIK Oil
 CEMENT
 AMOUNT ORDERED 145 cu 60/40 po2
670 GEL 1/4 # flo seal
 COMMON _____ @ _____
 POZMIX _____ @ _____
 GEL _____ @ _____
 CHLORIDE _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 HANDLING _____ @ _____
 MILEAGE _____ @ _____
 TOTAL _____

EQUIPMENT

UB
 PUMP TRUCK CEMENTER Vonfeldt Drilling
 #181 HELPER Bushenn
 BULK TRUCK DRIVER Zonnie
 #342
 BULK TRUCK DRIVER _____

REMARKS:

Safety meeting
 1st 20 AX - 3280'
 2nd 20 AX - 670'
 3rd 80 AX - 430'
 4th 10 AX - 40'
 15 AX - rat hole

SERVICE

DEPTH OF JOB 3280
 PUMP TRUCK CHARGE _____
 EXTRA FOOTAGE _____ @ _____
 MILEAGE _____ @ _____
 PLUG 1 8 3/8 wooden @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____

CHARGE TO: CIK Oil
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 _____ @ _____
 TOTAL _____
 TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE X Greg Dawson X

PRINTED NAME _____