

KANSAS CORPORATION COMMISSION
OIL & GAS DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5050
Name: Hummon Corporation
Address: 950 N. Tyler
City/State/Zip: Wichita, KS 67212
Purchaser: _____
Operator Contact Person: Karen Houseberg
Phone: (316) (316) 773-2300
Contractor: Name: Duke Drilling
License: 5929
Wellsite Geologist: Arden Ratzlaff
Designate Type of Completion:

New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____
Well Name: _____
Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. To Enhr/SWD
 Plug Back Plug Back Total Depth
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Enhr.?) Docket No. _____

<u>12/1/00</u>	<u>12/17/00</u>	<u>2/5/01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API NO. 15 - 15-007-22,630-0000
County: Barber
NE - NW - NW - 33 Sec. 33 S. R. 15 East West
450' fml feet from S / (N) (circle one) Line of Section
960' fml feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Z-Bar Well #: 1-33

Field Name: Wildcat
Producing Formation: Viola
Elevation: Ground: 1723 Kelly Bushing: 1724
Total Depth: 5214 Plug Back Total Depth: 5195

Amount of Surface Pipe Set and Cemented at 260' 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.

Drilling Fluid Management Plan *alt 10000 EIH 7/12/02*
(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume _____ bbls
Dewatering method used STATE CORPORATION COMMISSION
Location of fluid disposal if hauled offsite: 123 50 2001
Operator Name: _____
Lease Name: _____ License No.: _____
CONSERVATION DIVISION
Wichita, Kansas
Quarter _____ Sec _____ Twp _____ S. R. _____ East West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with 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 of 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: Sue Brady
Title: Sue Brady Date: 4/24/01

Subscribed and sworn to before me this 24 day of April

2001

Notary Public: Karen E. Houseberg

Date Commission Expires: 9/5/02

KAREN E. HOUSEBERG
NOTARY PUBLIC
STATE OF KANSAS
My Comm. Exp. Sept 5, 2002

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

UIC Distribution

Operator Name: Hummon Corporation Lease Name: Z-Bar Well: 1-33

Sec. 33 Twp. 33 S. R. 15 East West County: Barber

INSTRUCTIONS: Show important tops and bas of formations penetrated. Detail all cores. Report all final copies of drill stem tests giving interval test, 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 test, along with final charts(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken Yes No Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No Yes No
 (Submit Copy)

List All E. Logs Run:
 Dual Ind, Dual Comp Prsty, Micro, BHC Sonic, Sonic Cmt, Gamma Collar

DST1: 4737-4825 (Miss) 45,90,60,120 IHP:2364#, IFP 89, FIFP:106, ISIP:149
 IFPP:109, FFP:118, FSIP:143, FHP 2291#
 BHT- 125deg.
 Weak blow 13min, died

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

Heebner 3977(-2243)
 Lansing 4172(-2438)
 Stark 4520(-2786)
 Miss 4780(-3046)
 Kinderhook 4966(-3232)
Viola 5052(-3318)
 Simpson 5199(-3465)
 TD 5208(-3474)

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	17-1/2"	13-3/8"	48#	260'	ALW Class A	250sx 100sx	2% cc 3% cc 2% gel
Production	7-7/8"	4-1/2"	10.5#	5214'	60/40 Poz ASC	110 100	2%cc, 5%kolseal

ADDITIONAL CEMENTING / SQUEEZE RECORD

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

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4spf	5100-10	1250g acid,	5100-10
		500g 15%MCA, 2500g 15%MOD	5100-10

TUBING RECORD Size: 2-7/8" Set At: 4989 Packer At: _____ Liner Run Yes No

Date of First, Resumed Production, SWD or Enhr. n/a 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 METHOD OF COMPLETION Production Interval

Vented Sold Used On Lease Open Hole Perf Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other Specify _____