

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 5144
 Name: Mull Drilling Company, Inc.
 Address: P.O. Box 2758
 City/State/Zip: Wichita, KS 67201
 Purchaser: Eagling Trading
 Operator Contact Person: Scott C. Anderson
 Phone: (316) 264-6366
 Contractor: Name: _____
 License: _____
 Wellsite Geologist: _____
 Designate Type of Completion:
 _____ New Well _____ Re-Entry X Workover
X Oil _____ SWD _____ SIOW _____ Temp. Abd.
 _____ Gas _____ ENHR _____ SIGW
 _____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)
 If Workover/Re-entry: Old Well Info as follows:
 Operator: Mull Drilling Company, Inc.
 Well Name: Jacobs B #5
 Original Comp. Date: 7-25-61 Original Total Depth: 4410
 _____ Deepening X 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. _____
3-16-01 3-16-01 3-29-01
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

CONSERVATION DIVISION
Wichita, Kansas

API No. 15 - 077-00899000
 County: Harper
 _____ NE-NE Sec. 26 Twp. 31 S. R. 9 East West
 _____ 330 feet from 8 / N (circle one) Line of Section
 _____ 990 feet from E / W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Jacobs B Well #: 5
 Field Name: Spivey Grabs Basil
 Producing Formation: Mississippian
 Elevation Ground: 1594 Kelly Bushing: 1599
 Total Depth: 4410 Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 200 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 OWWO KGR 12/19/07
 (Data must be collected from the Reserve pit)
 Chloride content _____ ppm Fluid volume _____ bbls
 Dewatering method used _____
 Location of fluid disposal if hauled offsite: _____
 Operator Name: _____
 Lease Name: _____ License No.: _____
 Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
 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 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: Tamara J. Kohliaman
 Title: Senior Prod. Technician Date: 4-11-01
 Subscribed and sworn to before me this 12th day of April
19 2000
 Notary Public: Tamara J. Kohliaman
 Date Commission Expires: October 16, 2001

TAMARA J. KOHLIAMAN
Notary Public - State of Kansas
My Appt. Expires 10-16-2001

KCC Office Use ONLY

_____ Letter of Confidentiality Attached
 If Denied, Yes Date: _____
 _____ Wireline Log Received
 _____ Geologist Report Received
 _____ UIC Distribution

✓

X

Operator Name: Mull Drilling Company, Inc. Lease Name: Jacobs B Well #: 5

Sec. 26 Twp. 31 S. R. 9 East West County: Harper

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: Gamma Ray-Neutron	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Datum</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td>3437</td> <td>-1838</td> </tr> <tr> <td>Douglas</td> <td>3498</td> <td>-1899</td> </tr> <tr> <td>T Lansing</td> <td>3627</td> <td>-2028</td> </tr> <tr> <td>Base Kansas City</td> <td>4177</td> <td>-2578</td> </tr> <tr> <td>Marmaton</td> <td>4184</td> <td>-2585</td> </tr> <tr> <td>Cherokee</td> <td>4342</td> <td>-2743</td> </tr> <tr> <td>Mississippi</td> <td>4367</td> <td>-2768</td> </tr> </tbody> </table>	Name	Top	Datum	Heebner	3437	-1838	Douglas	3498	-1899	T Lansing	3627	-2028	Base Kansas City	4177	-2578	Marmaton	4184	-2585	Cherokee	4342	-2743	Mississippi	4367	-2768
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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	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8"		200		125	
Production		4 1/2"		4408		125	

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
	4398 (cut) (7-61)	250 gal acid, Frac 3000# sd & 3000 gal oil	
	4398 (cut) (10-67)	1000 gal acid, pad, 5000gal	
4	4379-4392 (3-01)	1500 gal 10% NeFe, Frac 55000# sand	

TUBING RECORD	Size 2 3/8	Set At 4327'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. 3-29-01	Producing Method <input type="checkbox"/> Flowing <input checked="" 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		
	3	8	71	2,667	28°		

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION

Production Interval 4370-4392 & 4398

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____