

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5285
Name: THE DANE G. HANSEN TRUST
Address: P.O. Box 187
City/State/Zip: Logan, KS 67646
Purchaser: _____
Operator Contact Person: Dane G. Bales
Phone: (785) 689-4816
Contractor: Name: Discovery Drilling Co., Inc.
License: 31548
Wellsite Geologist: Kitt Noah

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. _____

4/21/01 4/27/01 4/28/01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 163-23,318-0000
County: Rooks
C SE Sec. 8 Twp. 10 S. R. 20W East West
1320 feet from (S) / N (circle one) Line of Section
1320 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Williams "B" Well #: 4
Field Name: Marcotte
Producing Formation: None
Elevation: Ground: 2254 Kelly Bushing: 2262
Total Depth: 3826 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 210.15 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 *P4 A KGR 1/8/08*
(Data must be collected from the Reserve Pit)
Chloride content 18,000 ppm Fluid volume 320 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite: _____
Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West
County: _____ Docket No.: _____

CONSERVATION DIVISION

MAY 21 2001

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: Dane G. Bales
Title: Manager Date: May 18, 2001

Subscribed and sworn to before me this 18 day of May, 2001

Notary Public: Betty Jane Bittel
Date Commission Expires: July 17, 2004



KCC Office Use ONLY

Letter of Confidentiality Attached
If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name: THE DANE G. HANSEN TRUST Lease Name: Williams 'B' Well #: 4
 Sec. 8 Twp. 10 S. R. 20W East West County: Rooks

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 Yes No
 (Attach Additional Sheets)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy)

List All E. Logs Run:

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
Anhydrite	1757	+505
B/Anhydrite	1792	+470
Topeka	3288	-1026
Heebner	3489	-1227
Toronto	3511	-1249
Lansing	3527	-1265
BKC	3752	-1490
Arbuckle	Not encountered	
RTD	3826	

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 Pipe	12 1/4	8 5/8	20	210.15	Common	140	2%Gel&3%CC

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

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	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, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify)

Production Interval

ALLIED CEMENTING CO., INC. 6510

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

SERVICE POINT: Russell

15-163-23318-00-00

DATE <u>4-21-01</u>	SEC. <u>8</u>	TWP. <u>10</u>	RANGE <u>20</u>	CALLED OUT <u>4:00 PM</u>	ON LOCATION <u>5:30 PM</u>	JOB START	JOB FINISH <u>9:00 PM</u>
LEASE <u>Williams</u> WELL # <u>B-4</u>			LOCATION <u>Palco 45 1/2 W</u>			COUNTY <u>ROCKS</u>	STATE <u>KAN</u>
OLD OR NEW (Circle one)							

CONTRACTOR Discovery #1

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D.

CASING SIZE 8 1/2 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG. 15

PERFS.

DISPLACEMENT

OWNER _____

CEMENT AMOUNT ORDERED 1400lb Com 3-2

COMMON	<u>84</u>	@ <u>6.35</u>	<u>533.40</u>
POZMIX	<u>56</u>	@ <u>3.25</u>	<u>182.00</u>
GEL	<u>2</u>	@ <u>9.50</u>	<u>19.00</u>
CHLORIDE	<u>5</u>	@ <u>28.00</u>	<u>140.00</u>
		@	
		@	
		@	
		@	
HANDLING <u>147</u>		@ <u>1.05</u>	<u>154.35</u>
MILEAGE <u>4 1/2 SK / mile</u>			<u>211.60</u>
TOTAL			<u>1240.43</u>

EQUIPMENT

PUMP TRUCK CEMENTER Bill

177 HELPER DAVE

BULK TRUCK

282 DRIVER Glen

BULK TRUCK

DRIVER

REMARKS:

Ran 5 fts 8 1/2 rate 210

Cmt w/ 1400lb 3-2

pump plug w/ 12 1/2 hds water

ceint did circ

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>470.00</u>
EXTRA FOOTAGE		@	
MILEAGE <u>36</u>		@ <u>3.00</u>	<u>108.00</u>
PLUG <u>1-8 1/2 WOOD</u>		@	<u>45.00</u>
		@	
		@	
TOTAL			<u>623.00</u>

CHARGE TO: The D.G. Hanson Trust

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
TOTAL _____		

To Allied Cementing Co., Inc. **AG**

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 Thomas Al

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

Thomas Al

PRINTED NAME

RECEIVED
MAY 5 2001

ALLIED CEMENTING CO., INC.

6390

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

SERVICE POINT: R

DATE <u>4/28/01</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION <u>6:00 A.M.</u>	JOB START	JOB FINISH <u>10:30 A.M.</u>
LEASE <u>Williams B</u> WELL# <u>4</u>				LOCATION <u>Palco 45 1/4 W N INTO</u>	COUNTY <u>Rooks</u>	STATE <u>Ks</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Discovery Drilling

TYPE OF JOB Rotary Plug

HOLE SIZE 7 7/8 T.D. 3826'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER Same

CEMENT AMOUNT ORDERED 200 60/40 690 Gel 1/4# Flo

COMMON	<u>120</u>	@	<u>6.35</u>	<u>762.00</u>
POZMIX	<u>80</u>	@	<u>3.25</u>	<u>260.00</u>
GEL	<u>10</u>	@	<u>9.50</u>	<u>95.00</u>
CHLORIDE		@		
<u>Flo Seal</u>	<u>50#</u>	@	<u>1.40</u>	<u>70.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>210</u>	@	<u>1.05</u>	<u>220.50</u>
MILEAGE	<u>4 1/2</u>	@	<u>64.00</u>	<u>302.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Paul

153 HELPER Jason

BULK TRUCK

160 DRIVER Doofy

BULK TRUCK

_____ DRIVER _____

TOTAL 1709.00

REMARKS:

1775' - 25sx

1000' - 100sx

2100' - 40sx

40' - 105x

105x - Mouse

165x - Rat

SERVICE

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>470.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>36</u>	@	<u>3.00</u> <u>108.00</u>
PLUG	<u>858 DH.</u>	@	<u>23.00</u>
		@	
		@	

TOTAL 601.00

CHARGE TO: D.G. Hansen Trust

STREET _____

CITY _____ STATE _____ ZIP _____

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 Clyde Mayfield

PRINTED NAME _____