

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 # 9313
 Name: James D. Lorenz
 Address: 543A 22000 Rd.
 City/State/Zip: Cherryvale, KS 67335-8515
 Purchaser: Farmland Industries
 Operator Contact Person: James D. Lorenz
 Phone: (620) 328-4433
 Contractor: Name: L & S Well Service **RECEIVED**
 License: 32450
 Wellsite Geologist: none **FEB 20 2002**
 Designate Type of Completion:
 _____ New Well _____ Re-Entry _____ Workover **KCC WICHITA**
 _____ Oil _____ SWD _____ SLOW _____ Temp. Abd.
 _____ Gas _____ ENHR _____ SIGW
 _____ Dry Other (Core, WSW, Expl., Cathodic, etc) WIW
 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>1-12-02</u>	<u>1-15-02</u>	<u>1-17-02</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

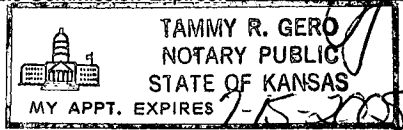
API No. 15 - 205-25433-0000
 County: Wilson
SW, SW, NW Sec. 2 Twp. 30 S. R. 15 East West
2905' feet from (S) N (circle one) Line of Section
4950' feet from (E) W (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Baker Well #: WIW#1
 Field Name: Fredonia
 Producing Formation: Bartlesville
 Elevation: Ground: 818' Kelly Bushing: 823'
 Total Depth: 1011' Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 45' of 7" Feet
 Multiple Stage Cementing Collar Used? Yes No
 If yes, show depth set _____ Feet
 If Alternate II completion, cement circulated from 1000'
 feet depth to surface w/ 120 sx cmt.

Drilling Fluid Management Plan *alt II KCR 1/17/08*
 (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: James D. Lorenz
 Title: agent Date: 2-15-02
 Subscribed and sworn to before me this 15th day of February, 2002
 Notary Public: Tammy R. Gero
 Date Commission Expires: 2-15-2005



KCC Office Use ONLY

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

Operator Name: James D. Lorenz Lease Name: Baker Well #: WIW#1
 Sec. 2 Twp. 30 S. R. 15 East West County: Wilson

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum <div style="text-align: center; font-weight: bold; font-size: 1.2em;"> RECEIVED FEB 20 2008 KCC WICHITA </div>
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CASING RECORD <input 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	8 5/8"	7"	45'	0'-45'	Portland	12	none
production	6 1/4"	2"	1000'	0'-1000'	Portland	120	3%gel,flowseal

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	Acid, Fracture, Shot, Cement Squeeze Record	Depth
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
			Robinson	1000'			
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 NA METHOD OF COMPLETION Production Interval

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

L S Well Service
543-A 22000 Rd.
Cherryvale, KS 67335
620-328-4433

Jim Lorenz
Set Surface 1-12-02
Start Drilling 1-14-02
Completed Drilling 1-15-02

ORIGINAL
S2, T30, R15 Wilson
Baker WIW #1
2905' SNL
4950' EWL

0-265 Shale
265-316 Lime
316-536 Shale
536-566 Lime
566-586 Shale
586-696 Lime
696-736 Shale
736-756 Lime
756-766 Shale
766-776 Lime
776-786 Shale
786-791 Lime
791-976 Shale
976-981 Sand
981-1001 Shale
1001-1011 Sand

API #15-205-25433-0000
Surface pipe 45' of 7"
Drilled 6 1/4" hole
Set with 12 sacks Portland cement

Packer 1000'

T.D. 1011'

RECEIVED
FEB 20 2002
KCC WICHITA

L & S WELL SERVICE
 543A 22000 ROAD
 CHERRYVALE, KANSAS 67335-8515

316-328-4433

ORIGINAL

00301

API # 15-205-25433-00-00

CEMENTING 1-17-02 John Almond
 TICKET # satisfied

SECTION	TOWNSHIP	RANGE	COUNTY	STATE	DISTRICT #	DATE BEGAN	DATE COMPLETE
2	30	15	Wilson	Ks	3	1-17-02	1-17-02
OWNER James D. Lorenz		CONTRACTOR			CHARGE TO James D. Lorenz		
MAILING ADDRESS 543A 22000 RD		CITY Cherryvale			STATE/ZIP Kansas 67335-8515		
LEASE NAME/WELL NUMBER Baker WW		SIZE OF HOLE 6 1/4"	CASING SIZE 2" x 1000'	AMOUNT & KIND OF CEMENT USED 120 sz Portland & 3% Grel flowseal			
CEMENTER Bart Lorenz		HELPERS NAMES Steven Michael Ried					
REMARKS: 1011' of 2" ran down well with Robinson set down packed set at 1000'. (last 10' of pipe below packer perforated) 1" pipe ran down backside and cement pumped to surface. 1" pulled out - back side topped off. Used total of 120 sz Portland Cement							

TYPE OF TREATMENT

- SURFACE PIPE 1-12-02 (45' of 7") with 12 sz Portland Cement
- PRODUCTION CASING 1011' - with set down packer (Robinson) set at 1000' - last 10' of pipe below packer perforated
- SQUEEZE CEMENT
- PLUG & ABANDON
- OTHER

RECEIVED
 FEB 20 2002
 KCC WICHITA

THE ABOVE JOB WAS DONE UNDER SUPERVISION OF OWNER, OPERATOR, OR HIS AGENT WHOSE SIGNATURE APPEARS BELOW.

AGENT OF CONTRACTOR OR OPERATOR

Michael S. Jones

SIGNATURE OF PLUGGING CONTRACTOR OPERATOR

Bart Lorenz