

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

API NO. 15- 001-28907-0000

ORIGINAL

County Allen

NW NW - - - Sec. 17 Twp. 25 Rge. 19

4950 Feet from S/W (circle one) Line of Section

4620 Feet from E/W (circle one) Line of Section

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

Lease Name Porter B Well # 1

Field Name Iola

Producing Formation Bartlesville

Elevation: Ground na KB

Total Depth 915 PSTD

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set Feet

If Alternate II completion, cement circulated from

feet depth to v/ ex cnt.

Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) *NOT II KGR 1/10/08*

Chloride content ppm Fluid volume bbls

Devising method used

Location of fluid disposal if hauled offsite:

Operator Name

Lease License No.

Quarter Sec. Twp. S Rng. E/W

County Docket No.

Operator: License # 5602

Name: N&B Enterprises

Address Box 812

City/State/Zip Chanute, Kansas 66720

Purchaser: N&B Enterprises, Inc.

Operator Contact Person: J.R. Burris

Phone (316) 365-3181

Contractor: Name: J.R. Burris

License: 5602

Wellsite Geologist: none

Designate Type of Completion

New Well  Re-Entry  Workover

Oil  SVD  SIGW  Temp. Abd.

Gas  ENHR  SIGW

Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator:

Well Name:

Comp. Date Old Total Depth

Deepening Re-perf. Conv. to In/SVD

Plug Back PSTD

Commingled Docket No.

Dual Completion Docket No.

Other (SVD or In?) Docket No.

04/03/01 04/23/01 04/27/01

Spud Date Date Reached TD Completion Date

CONSERVATION DIVISION

JUN 1 2001

RECEIVED  
KANSAS CORPORATION COMMISSION

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 *J.R. Burris*

Title co-partner Date

Subscribed and sworn to before me this 30th day of May 2001.

Notary Public *Marsha M. Burris*

Date Commission Expires 3/28/04

**MARSHA M. BURRIS**  
Notary Public - State of Kansas  
My Appt. Expires March 28, 2004

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/> SVD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other
(Specify)		

Operator Name N&B Enterprises

Lease Name Porter B

Well # 1

Sec. 17 Twp. 25 Rge. 19

East  
 West

County Allen

**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  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:

Name	Formation (Top), Depth and Datum		Sample
	Top	Datum	
soil	0	5	
lime w/shale	5	257	
shale	257	438	
shale w/lime	438	633	
shale	633	855	
sand	855	915TD	

CASING RECORD <input type="checkbox"/> New <input checked="" 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	11 1/2"	8 5/8"	20	20'	Portland	5 none	
production	6 3/4"	4 1/2"	10	860'	50/50 pos	120	2 gel

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			NA	
<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
		NA		NA	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			na					
Date of First, Resumed Production, SVD or Inj.				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
	0	0	<input checked="" type="checkbox"/>	15	0	0	0	0

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

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

Production Interval \_\_\_\_\_



# CONSOLIDATED

## INDUSTRIAL SERVICES

AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720  
316-431-9210 OR 800-467-8676

# ORIGINAL

TICKET NUMBER **13705**

LOCATION Chanute

### FIELD TICKET

DATE <b>4/14/01</b>	CUSTOMER ACCT # <b>5675</b>	WELL NAME <b>Potter B #1</b>	QTR/QTR	SECTION <b>17</b>	TWP <b>25</b>	RGE <b>19</b>	COUNTY <b>AI</b>	FORMATION
CHARGE TO <b>D and B</b>				OWNER				
MAILING ADDRESS <b>PO Box 812</b>				OPERATOR				
CITY & STATE <b>Chanute KS 66720</b>				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
<b>5401</b>	<b>2nd of 2</b>	<b>PUMP CHARGE Cement Pump</b>		<b>477.<sup>00</sup></b>
<b>5402</b>	<b>860</b>	<b>Casing Footage</b>		<b>120.<sup>00</sup></b>
		HYDRAULIC HORSE POWER		
<b>1116</b>	<b>2.5 SK</b>	<b>Prem Gel In Load</b>		<b>29.<sup>50</sup></b>
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
<b>5502</b>	<b>2.5 hr</b>	<b>VACUUM TRUCKS</b>		<b>175.<sup>00</sup></b>
		FRAC SAND		
<b>1124</b>	<b>120 SK</b>	<b>CEMENT 50/50 2%</b>		<b>916.<sup>00</sup></b>
		NITROGEN	<b>Tax</b>	<b>68.<sup>69</sup></b>
<b>5407</b>	<b>20 mi</b>	<b>TON-MILES Delivery</b>		<b>NIC</b>
<b>ESTIMATED TOTAL</b>				<b>1832.<sup>00</sup></b>

NSCO #15007

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN

CUSTOMER or AGENT (PLEASE PRINT)

DATE

171637