

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

Operator: License # 5602

Name: N&B Enterprises

Address Box 812

City/State/Zip Chanute, Kansas 66720

Purchaser: N&B Enterprises

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  SWD  SIOV  Temp. Abd.

Gas  ENHR  SIGW

Dry  Other (Core, MSW, 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 Inj/SWD

Plug Back \_\_\_\_\_ PSTD

Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_

Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_

Other (SWD or Inj?) \_\_\_\_\_ Docket No. \_\_\_\_\_

12/8/00 3/16/01 4/3/01

Spud Date Date Reached TD Completion Date

API NO. 15- 001-28,884-0000

County Allen **ORIGINAL**

NW - NW - SE - 5 Sec. 25 Twp. 19 Rge. 19

2400 Feet from S/W (circle one) Line of Section

2310 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 Henry Well # 1

Field Name Iola

Producing Formation Bartlesville

Elevation: Ground na KB \_\_\_\_\_

Total Depth 865 PSTD \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from \_\_\_\_\_

feet depth to 0-817 w/ 135 sx cmt.

Drilling Fluid Management Plan CP II KGR 1/4/08  
(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 \_\_\_\_\_

License No. \_\_\_\_\_

Quarter Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

Docket No. \_\_\_\_\_

RECEIVED  
STATE CORPORATION COMMISSION  
ADVISORY  
9-2001

CONSERVATION DIVISION  
Wichita, Kansas

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 5/2/01

Subscribed and sworn to before me this 5th day of April 19 2001

Notary Public Marsha M. Burris

Date Commission Expires \_\_\_\_\_

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

3/28/04

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Geologist Report Received  
Distribution  
KCC  SWD/Rep  NGPA  
KGS  Plug  Other  
(Specify)

Operator Name N&B Enterprises

Lease Name Henry

Well # 1

Sec. 5 Twp. 17S 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 & Clay	0	8	
shale	8	24	
lime w/shale	24	224	
shale	224	445	
lime & shale	445	592	
shale	592	805	
sand	805	865	

**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	11 1/2"	8 5/8"	20	20'	Portland	5 none	
production	6 3/4"	4 1/2"	10	817'	Posmix	135	pasmix

**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 Plug 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 na Packer At \_\_\_\_\_ Liner Run  Yes  No

Date of First, Resumed Production, SMD or Inj. \_\_\_\_\_ 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:  Vented  Sold  Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION  Open Hole  Perf.  Quality 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 17030

LOCATION T-6 1/3

FIELD TICKET

DATE <u>12-9-00</u>	CUSTOMER ACCT # <u>51025</u>	WELL NAME <u>#1</u>	QTR/QTR <u>2</u>	SECTION <u>25</u>	TWP <u>19</u>	RGE <u>5</u>	COUNTY <u>AL</u>	FORMATION
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CHARGE TO <u>N-K</u>	OWNER <u></u>
MAILING ADDRESS <u>P.O. Box 912</u>	OPERATOR <u></u>
CITY & STATE <u>Chanute KS 66720</u>	CONTRACTOR <u></u>

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
<u>5421-10</u>	<u>1</u>	<u>PUMP CHARGE</u>		<u>525.00</u>
<u>5422-10</u>	<u>819'</u>	<u>HYDRAULIC HORSE POWER</u>		<u>106.00</u>
<u>119-10</u>	<u>14.85</u>	<u>STAND BY TIME</u>		<u>44.00</u>
		<u>MILEAGE</u>		
		<u>WATER TRANSPORTS</u>		
<u>5502-10</u>	<u>N/A</u>	<u>VACUUM TRUCKS</u>		
		<u>FRAC SAND</u>		
<u>1121-10</u>	<u>13554.3</u>	<u>CEMENT</u>		<u>1173.50</u>
		<u>NITROGEN</u>		
<u>5417-10</u>	<u>24 miles</u>	<u>TON-MILES</u>		<u>72.20</u>
				<u>175.00</u>
				<u>1435.60</u>

RECEIVED  
STATE CORPORATION COMMISSION  
APR - 9 2001  
CONSERVATION DIVISION  
Wichita, Kansas

NSCO #15007

CUSTOMER or AGENTS SIGNATURE \_\_\_\_\_ CIS FOREMAN [Signature]

CUSTOMER or AGENT (PLEASE PRINT) \_\_\_\_\_ DATE 12-9-00

170386



**CONSOLIDATED**  
**INDUSTRIAL**  
**SERVICES**  
 AN INFINITY COMPANY  
 211 W. 14TH STREET, CHANUTE, KS 66720  
 316-431-9210 OR 800-467-8676

**ORIGINAL**

TICKET NUMBER **17030**

LOCATION T.6 N5

**FIELD TICKET**

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
12-9-00	51675	H1		25	17	5	AL	
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401-10	1	PUMP CHARGE		525 <sup>00</sup>
5402-10	817'	HYDRAULIC HORSE POWER		106 <sup>00</sup>
1119-10	4355			44 <sup>00</sup>
5502-10	N/A	VACUUM TRUCKS		
1104-10	135545	CEMENT		1170 <sup>50</sup>
5402-10	2.4 miles	TON-MILES		175 <sup>00</sup>
			Tax	79 <sup>20</sup>
			<b>ESTIMATED TOTAL</b>	<b>1935<sup>60</sup></b>

NSCO #15087

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN

CUSTOMER or AGENT (PLEASE PRINT)

DATE

12-9-00

1710386

**CONSOLIDATED INDUSTRIAL SERVICES**  
 AN INFINITY COMPANY  
 211 W. 14TH STREET, CHANUTE, KS 66720  
 316-431-9210 OR 800-467-8676

**ORIGINAL**

TICKET NUMBER **17030**

LOCATION Tola KS

**FIELD TICKET**

DATE 12-9-00	CUSTOMER ACCT # 51695	WELL NAME H1	QTR/QTR	SECTION 25	TWP 11	RGE 5	COUNTY HL	FORMATION
CHARGE TO N & B				OWNER				
MAILING ADDRESS P.O. Box 912				OPERATOR				
CITY & STATE Chanute KS 66720				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401-10	1	PUMP CHARGE		5.25 <sup>00</sup>
5402-10	819'	HYDRAULIC HORSE POWER		106.21
1119-10	H-SS			44.20
5502-10	N/A	VACUUM TRUCKS		
1112-10	13554S	CEMENT		1172.50
5409-10	24 miles	TON-MILES		175.00
			ESTIMATED TOTAL	1935.60

CUSTOMER or AGENTS SIGNATURE \_\_\_\_\_ CIS FOREMAN \_\_\_\_\_  
 CUSTOMER or AGENT (PLEASE PRINT) \_\_\_\_\_ DATE 12-9-00

1-107386