

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

3070 FSL
2970 FEL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 7079
Name: Don Fox
Address: Box 446
City/State/Zip: Chase, Ks. 67524
Purchaser: ONEOK
Operator Contact Person: D. Wood
Phone: (620) 727-4200
Contractor: Name: Sterling Drilling.Co.
License: 5142
Wellsite Geologist: Wayne Lebsack

API No. 15 - 15-159-22390-00-00
County: Rice
SE SE NW Sec. 22 Twp. 18 S. R. 9 East West
2310 FSL 3070 feet from S (circle one) Line of Section
2070 FSL 2310 feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:

Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

(circle one) NE SE NW SW
Lease Name: Friedley Well #: 1
Field Name: Volkland

If Workover/Re-entry: Old Well Info as follows:

Producing Formation: Chase Group
Elevation: Ground: 1724 Kelly Bushing: 1733
Total Depth: 3320 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 213 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.

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. _____

Drilling Fluid Management Plan *alt I KGR 1/15/08*
(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.: _____

7-14-01 7-21-01 8-20-01
Spud Date or Date Reached TD Completion Date or Recompletion Date

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: Don Fox
Title: Owner Date: Feb. 27, 2002

Subscribed and sworn to before me this 27th day of February

2002.
Notary Public: Joyce E. Harris

Date Commission Expires: March 30, 2002

NOTARY PUBLIC - State of Kansas
JOYCE E. HARRIS
Exp. 3-30-02

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution
RECEIVED
FEB 28 2002
KCC WICHITA

X

Operator Name: Don Fox Lease Name: Friedley Well #: 1
 Sec. 22 / Twp. 18 S. R. 9 East West County: Rice

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
Brownville 2008 2014
Arb 3278 3320

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
Prod.	7/78"	4 1/2"	105	2211		125	ASC

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
2	2006-2016		

TUBING RECORD	Size Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2-3/8	2010	
Date of First, Resumed Production, SWD or Enhr.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbbs.	Gas Mcf	Water Bbbs. Gas-Oil Ratio Gravity
		X 80MCP	

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.
 P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

..... ORIGINAL

* INVOICE *

Invoice Number: 084752

Invoice Date: 07/15/01

Sold Don Fox
 To: P.O. Box 446
 Chase, KS
 67524

RECEIVED
 STATE CORPORATION COMMISSION

JAN 29 2002

Cust. I.D.
 P.O. Number... Friedley #1
 P.O. Date.... 07/15/01

Due Date... 08/14/01
 Terms... Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	120.00	SKS	6.6500	798.00	E
Pozmix	80.00	SKS	3.5500	284.00	E
Gel	3.00	SKS	10.0000	30.00	E
Chloride	6.00	SKS	30.0000	180.00	E
Handling	209.00	SKS	1.1000	229.90	E
Mileage (34)	34.00	MILE	8.3600	284.24	E
209 sks @ \$.04 per sk per mi					
Surface	1.00	JOB	520.0000	520.00	E
Mileage pmp trk	34.00	MILE	3.0000	102.00	E
Top Wood	1.00	EACH	45.0000	45.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 247.31
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2473.14
 Tax..... 0.00
 Payments: 0.00
 Total.... 2473.14

pd #10475
7-23-01

2473.16
247.31 -

2225.85

ALLIED CEMENTING CO., INC. 7992

ORIGINAL

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

SERVICE POINT:
Great Bend

DATE <u>7.21.01</u>	SEC. <u>22</u>	TWP. <u>18</u>	RANGE <u>9</u>	CALLED OUT <u>9:00 PM</u>	ON LOCATION <u>11:00 PM</u>	JOB START <u>4:30 AM</u>	JOB FINISH <u>7:45 AM</u>
LEASE <u>Friedly</u>		WELL # <u>1</u>	LOCATION <u>Chase 9 N, 1/2 E, south into</u>		COUNTY <u>Rice</u>	STATE <u>Kansas</u>	
OLD OR (NEW) (Circle one)							

CONTRACTOR Sterling Drilling
 TYPE OF JOB Longstring
 HOLE SIZE 7 7/8 T.D. 3320'
 CASING SIZE 4 1/2 - 10.5" DEPTH 2211'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE 4 1/2 x 11 DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX 1000* MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 43.80
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 34 1/2

OWNER Don Fox
 CEMENT
 AMOUNT ORDERED 140 dx ASC

EQUIPMENT

11B.
 PUMP TRUCK CEMENTER J.D. Drilling
 # 120 HELPER Steve Turley
 BULK TRUCK
 # 341 DRIVER Lannie Maquis
 BULK TRUCK
 # _____ DRIVER _____

COMMON	<u>140 ASC</u>	@	<u>8.50</u>	<u>1190.00</u>
POZMIX		@		
GEL		@		
CHLORIDE		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>140</u>	@	<u>1.10</u>	<u>154.00</u>
MILEAGE	<u>34</u>			<u>190.40</u>
TOTAL				<u>\$ 1534.40</u>

REMARKS:
Ran 2211' of 4 1/2 casing to bottom.
Drop ball and pump with rig mud,
pressure ball thru, circ w/ rig,
shut down hook up to pump, tie & plug
Rathole with 150x. Wash out pump & lines,
pump 3 bbls h^{2o} down 4 1/2 casing, mixed 125 dx
ASC cement down casing, shut down, wash out
pump & lines, change valves over, release 4 1/2 plug
& displace with 34 BLS h^{2o} land plug at 1000*
Released psi, Dry.

SERVICE

DEPTH OF JOB	<u>2211'</u>			
PUMP TRUCK CHARGE				<u>1130.00</u>
EXTRA FOOTAG		@		
MILEAGE	<u>34</u>	@	<u>3.00</u>	<u>102.00</u>
PLUG	<u>1. 4 1/2 Rubber</u>	@	<u>48.00</u>	<u>48.00</u>
		@		
		@		
TOTAL				<u>\$ 1280.00</u>

CHARGE TO: Don Fox
 STREET 2700 Westminister
 CITY Hutchinson STATE Kansas ZIP 67502

FLOAT EQUIPMENT

<u>1. 4 1/2 Guide shoe</u>	@	<u>125.00</u>	<u>125.00</u>
<u>1. 4 1/2 Sonnet</u>	@	<u>210.00</u>	<u>210.00</u>
<u>2. 4 1/2 Centralizers</u>	@	<u>45.00</u>	<u>90.00</u>
<u>1. 4 1/2 Basket</u>	@	<u>116.00</u>	<u>116.00</u>
	@		

(Float did hold)

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment
 and furnish cementer and helper to assist owner or

TOTAL \$ 541.00

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566

ORIGINAL
 * INVOICE *

Invoice Number: 084827

Invoice Date: 07/21/01

Sold Don Fox
 To: P.O. Box 446
 Chase, KS
 67524

STATE CORP
 RE
 JAN
 CONSERVATION

Cust I.D.....: Fox
 P.O. Number...: Friedly #1
 P.O. Date.....: 07/21/01

Due Date: 08/20/01
 Terms: Net 30

Item # / Desc	Qty	Used	Unit	Price	Net	TX
ASC	140.00		SKS	8.5000	1190.00	E
Handling	140.00		SKS	1.1000	154.00	E
Mileage (34)	34.00		MILE	5.6000	190.40	E
140 sks @ \$.04 per sk per mi						
Longstring	1.00		JOB	1130.0000	1130.00	E
Mileage pmp trk	34.00		MILE	3.0000	102.00	E
Rubber plug	1.00		EACH	48.0000	48.00	E
Guide Shoe	1.00		EACH	125.0000	125.00	E
Insert	1.00		EACH	210.0000	210.00	E
Centralizers	2.00		EACH	45.0000	90.00	E
Basket	1.00		EACH	116.0000	116.00	E

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$335.54
 ONLY if paid within 30 days from Invoice Date

Subtotal: 3355.40
 Tax.....: 0.00
 Payments: 0.00
 Total....: 3355.40
 335.54

301986

MD # 10492

7-27-07