

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

API NO. 15-001-28885-0000

County Allen

NW Sw NE - Sec. 5 Twp. 25 Rge. 19 E V
3630

2310 Feet from S/W (circle one) Line of Section

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

Lease Name H Enry Well # 2

Field Name Iola

Producing Formation Bartlesville

Elevation: Ground na KB

Total Depth 885 PBTD

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 _____ w/ _____ ex cnt.

Drilling Fluid Management Plan Alt II RGR 1/7/08
(Data must be collected from the Reserve Pit)

CONSERVATION DIVISION

RECEIVED
KANSAS CORPORATION COMMISSION

Operator: License # 5602

Name: N&B Enterprises

Address Box 812

City/State/Zip Chanute, Kansas 66720

Purchaser: _____

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 SIOW 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 PBTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

1/9/01 3/6/01 3/13/01

Spud Date Date Reached TD Completion Date

Chloride content _____ ppm Fluid volume _____ bbls

Deaerating method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. _____ Twp. _____ Rng. _____ E/W

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 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 8 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	Letter of Confidentiality Attached
C	Wireline Log Received
C	Geologist Report Received
Distribution	
<input type="checkbox"/> KCC	<input type="checkbox"/> SWD/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 Henry Well # 2

Sec. 5 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	
lime	0	30	
shale	30	48	
lime w/shale st	48	246	
shale	246	420	
shale w/lime st	420	612	
shale	612	868	
sand	868	885 TD	

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"	7 5/8"	20	20'	Portland	5	none
production	6 3/4"	4 1/2"	10	868'	50/50 pos	140	3 gel

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(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, SWD 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
	0	-0	x	15	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

TICKET NUMBER **17048**

LOCATION Chanute

FIELD TICKET

ORIGINAL

DATE <u>1/11/01</u>	CUSTOMER ACCT # <u>5675</u>	WELL NAME <u>Henry #2</u>	QTR/QTR	SECTION <u>25</u>	TWP <u>19</u>	RGE <u>3</u>	COUNTY <u>AL</u>	FORMATION
CHARGE TO <u>10 and 15</u>				OWNER				
MAILING ADDRESS <u>Po Box 812</u>				OPERATOR				
CITY & STATE <u>Chanute KS 66720</u>				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
<u>5401</u>	<u>1 well</u>	<u>PUMP CHARGE Cement Pump</u>		<u>525.00</u>
<u>5402</u>	<u>868</u>	<u>Casing Footage</u>		<u>112.84</u>
		HYDRAULIC HORSE POWER		
<u>1118</u>	<u>3 SK</u>	<u>Prem Gel In Load</u>		<u>33.00</u>
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
		VACUUM TRUCKS <u>Supplied by Customer</u>		
		FRAC SAND		
<u>1124</u>	<u>140 SK</u>	<u>CEMENT 50/50 2%</u>		<u>1050.00</u>
		NITROGEN		
<u>5407</u>	<u>24</u>	<u>TON-MILES Delivery</u>	<u>100</u>	<u>2400.00</u>
				<u>445.00</u>
				<u>1800.00</u>

NSCO #15007

ESTIMATED TOTAL

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Owyan

CUSTOMER or AGENT (PLEASE PRINT)

DATE

170705



**CONSOLIDATED
INDUSTRIAL
SERVICES**

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

TICKET NUMBER **17048**

LOCATION Chanute

FIELD TICKET

ORIGINAL

DATE <u>11/11/01</u>	CUSTOMER ACCT # <u>5675</u>	WELL NAME <u>Henry #2</u>	QTR/QTR	SECTION <u>25</u>	TWP <u>19</u>	RGE <u>3</u>	COUNTY <u>AL</u>	FORMATION
CHARGE TO <u>10 and 15</u>				OWNER				
MAILING ADDRESS <u>Po Box 812</u>				OPERATOR				
CITY & STATE <u>Chanute KS 66720</u>				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
<u>5401</u>	<u>1 well</u>	<u>PUMP CHARGE Cement Pump</u>		<u>585.00</u>
<u>5402</u>	<u>868</u>	<u>Casing Footage</u>		<u>112.84</u>
		HYDRAULIC HORSE POWER		
<u>1118</u>	<u>3 SK</u>	<u>Prem Gel In Load</u>		<u>33.00</u>
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
		VACUUM TRUCKS <u>Supplied by Customer</u>		
		FRAC SAND		
<u>1124</u>	<u>140 SK</u>	<u>CEMENT 50/50 2%</u>		<u>1150.00</u>
		NITROGEN		
<u>5407</u>	<u>24</u>	<u>TON-MILES Delivery</u>	<u>74.23</u>	<u>4.43</u>
ESTIMATED TOTAL				<u>1800.00</u>

NSCO #15007

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Dwayne

CUSTOMER or AGENT (PLEASE PRINT)

DATE

170705