

ORIGINAL

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

API NO. 15- 175-20509-00-01
County SEWARD
NW-NE Sec. 13 Twp. 34S Rge. 32 X W

Operator: License # 7457

Name: ELDER & VAUGHN, INC.

Address P. O. BOX 18938

City/State/Zip OKLA. CITY, OK 73154

Purchaser: _____

Operator Contact Person: JACK H. VAUGHN

Phone (405) 842-8877

Contractor: Name: CHEYENNE DRILLING, INC.

License: 5382

Wellsite Geologist: NONE

Designate Type of Completion
 New Well Re-Entry Workover

Oil SVD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc.)

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

Operator: MONEXCO

Well Name: DAVIES #1-13

Comp. Date 7/23/81 Old Total Depth 6450'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

3/21/2001 3/22/2001 4/19/2001
Spud Date Date Reached TD Completion Date

660 Feet from S/N (circle one) Line of Section
1980 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 DAVIES Well # 1-13

Field Name BLUE BELL NW

Producing Formation NONE

Elevation: Ground 2726' KB 2735'

Total Depth 3350' PBDT 3301'

Amount of Surface Pipe Set and Cemented at 1520 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 cnt.

Drilling Fluid Management Plan P+P A KJR 1-9/08
(Data must be collected from the Reserve Pit)

Chloride content 8000 ppm Fluid volume 300 bbls

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 _____

Title Vice Pres Date 5/3/2001

Subscribed and sworn to before me this 3 day of May

Notary Carolyn Norrup

Date Commission Expires 1-18-2002

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

Operator Name ELDER & VAUGHN, INC.

Lease Name DAVIES

Well # 1-13

Sec. 13 Twp. 34S Rge. 32
 East
 West

County SEWARD

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.)

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

List All E.Logs Run:
 CASED HOLE GAMMA RAY - CEMENT BOND LOG

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
PRODUCTION	7-7/8"	5-1/2"	17	3328'	THIX-O-TROPIC	225	10% SALT & 5# KOL-SEAL PER SACK

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	2696-2706'	ACIDIZE W/750 GALS.15% HCL	AS SHOWN
2	2657-2663'	ACIDIZE W/500 GALS.15% HCL	AS SHOWN

TUBING RECORD	Size	Set At	Packer At	Liner Run
NONE				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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
	DRY HOLE				

Disposition of Gas:

Vented Sold Used on Lease
 (If vented, submit ACD-18.)

METHOD OF COMPLETION

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____

Production Interval _____

ALLIED CEMENTING CO., INC.

7712

Federal Tax I.D.#

ORIGINAL

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

SERVICE POINT:

Medicine Lodge

DATE <u>3-22-01</u>	SEC. <u>13</u>	TWP. <u>34S</u>	RANGE <u>32W</u>	CALLED OUT <u>5:30 Am</u>	ON LOCATION <u>8:40 Am</u>	JOB START <u>11:55 Am</u>	JOB FINISH <u>12:30 pm</u>
LEASE <u>Davis</u>		WELL# <u>1-13</u>	LOCATION <u>Hayne Ks 2 1/2 E</u>	COUNTY <u>Seward</u>	STATE <u>Ks.</u>		
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR Cheyenne Rig 8"
 TYPE OF JOB production
 HOLE SIZE 7 1/8 T.D. 3350'
 CASING SIZE 5 1/2 x 17" DEPTH 3319'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX 1200 MINIMUM 100
 MEAS. LINE SHOE JOINT 25
 CEMENT LEFT IN CSG.
 PERFS.
 DISPLACEMENT 76 1/2 bbls Fresh H₂O

OWNER Elder + Vaughn
 CEMENT
 AMOUNT ORDERED
225 sk ASC + 5" Kol-seal
500 Gal mud-clean

EQUIPMENT
 PUMP TRUCK CEMENTER Art R
 # 352 HELPER Shane W.
 BULK TRUCK
 # 261 DRIVER Dave F.
 BULK TRUCK
 # DRIVER

COMMON	@		
POZMIX	@		
GEL	@		
CHLORIDE	@		
<u>ASC</u>	@	<u>225</u>	<u>9.05</u> <u>2036.25</u>
<u>Kol-SEAL</u>	@	<u>1125*</u>	<u>.38</u> <u>427.50</u>
<u>MUD CLEAN</u>	@	<u>500 GAL</u>	<u>.75</u> <u>375.00</u>
	@		
	@		
HANDLING	@	<u>288</u>	<u>1.05</u> <u>302.40</u>
MILEAGE	@	<u>288 x 35</u>	<u>.04</u> <u>403.20</u>

TOTAL 3544.35

REMARKS:

SERVICE

Pipe on bottom, Break circulation.
Circulate for 40 min. pump 500 Gal Mud clean.
+225 sk ASC + 5" Kol-seal, wash out + pump +
lines Release plug Displace with 76 1/2 bbls
Freshwater, Bump plug + Float Held

DEPTH OF JOB	<u>3319</u>		
PUMP TRUCK CHARGE			<u>1080.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>10</u>	@	<u>3.00</u> <u>30.00</u>
PLUG	<u>Rubber 5 1/2"</u>	@	<u>50.00</u> <u>50.00</u>
		@	
		@	

TOTAL 1160.00

CHARGE TO: Elder + Vaughn
 STREET _____
 CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL _____

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____
 TOTAL CHARGE 4704.35
 DISCOUNT 470.44 IF PAID IN 30 DAYS
\$ 4233.91
Jack H. Vaughn
 PRINTED NAME

SIGNATURE 