

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

API NO. 15- 001-28908-0000 ORIGINAL

County Allen

NAME NW Sec. 17 Twp. 25 Rge. 19

4950 Feet from S/W (circle one) Line of Section  
3300 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 # 2

Field Name Jola

Producing Formation Bartlesville

Elevation: Ground na KB

Total Depth 915 PBD

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes  No

When, show depth out \_\_\_\_\_ Feet

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

Depth to \_\_\_\_\_ w/ \_\_\_\_\_ sz cmt.

Fluid Management Plan Alt II KJR 1-11-08  
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 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  SWD  SIOW  . Abd  
 Gas  ENHR  SIGW  
 Dry  Other (Core, MSW, Expl., Productive, 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 \_\_\_\_\_ PBD

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

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

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

4/2/01 4/23/01 4/27/01  
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  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Geologist Report Received  
  
Distribution  
KCC \_\_\_\_\_ SWD/Rep \_\_\_\_\_ KSPA \_\_\_\_\_  
KGS \_\_\_\_\_ Plug \_\_\_\_\_ Other \_\_\_\_\_  
(Specify)

Operator Name N&B Enterprises

Lease Name Porter B Well # 2

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	6	
lime w/shale	6	251	
shale	251	437	
shale w/lime	437	633	
shale	633	865	
sand	865	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"	5 7/8"	20	20'	Portland	5 none	
production	6 3/4"	4 1/2"	10	868'	50/50 pos	120	2 sacks 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	Packer At	Liner Run
		na		<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
	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

# ORIGINAL

TICKET NUMBER **13704**

LOCATION Chanute

## FIELD TICKET

DATE <b>4/4/01</b>	CUSTOMER ACCT # <b>5675</b>	WELL NAME <b>Porter B-2</b>	QTR/QTR	SECTION <b>17</b>	TWP <b>25</b>	RGE <b>19</b>	COUNTY <b>A'</b>	FORMATION
CHARGE TO <b>NO 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
5401	<b>1st of 2</b>	PUMP CHARGE <i>Cement Pumped</i>		<b>525<sup>00</sup></b>
5402	<b>868</b>	<i>Easing Footage</i> HYDRAULIC HORSE POWER		<b>131.50</b>
1118	<b>2.5SK</b>	<i>Prem Gel In Load</i>		<b>295<sup>00</sup></b>
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
5502	<b>2.5hr.</b>	VACUUM TRUCKS		<b>175<sup>00</sup></b>
		FRAC SAND		
1124	<b>120 SK</b>	CEMENT <i>50/50 2b</i>		<b>966<sup>00</sup></b>
		NITROGEN		
5407	<b>20 mi.</b>	TON-MILES <i>Delivery</i>		<b>68.69</b>
			Tax	<b>190<sup>00</sup></b>
				<b>2075.20</b>

NCSO #1507

ESTIMATED TOTAL

CUSTOMER or AGENTS SIGNATURE \_\_\_\_\_ CIS FOREMAN **Dwayne**

CUSTOMER or AGENT (PLEASE PRINT) \_\_\_\_\_ DATE \_\_\_\_\_

**171636**

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

**ORIGINAL**

TICKET NUMBER **13704**

LOCATION Chanute

**FIELD TICKET**

DATE <b>4/4/01</b>	CUSTOMER ACCT # <b>5675</b>	WELL NAME <b>Porter B-2</b>	QTR/QTR	SECTION <b>17</b>	TWP <b>25</b>	RGE <b>19</b>	COUNTY <b>A'</b>	FORMATION
CHARGE TO <b>NO and B</b>				OWNER				
MAILING ADDRESS <b>PO Box 812</b>				OPERATOR				
CITY & STATE <b>Chanute KS 66720</b>				CONTRACTOR				

ACCOUNT CODE	QUANTITY of UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
<b>5401</b>	<b>1st OF 2</b>	<b>PUMP CHARGE Cement Pumped</b>		<b>525.00</b>
<b>5402</b>	<b>868</b>	<b>Easing Footage</b>		<b>191.32</b>
		HYDRAULIC HORSE POWER		
<b>1118</b>	<b>255K</b>	<b>Prem Gel In Load</b>		<b>295.00</b>
		STAND BY TIME		
		MILEAGE		
		WATER TRANSPORTS		
<b>5502</b>	<b>251</b>	<b>VACUUM TRUCKS</b>		<b>175.00</b>
		FRAC SAND		
<b>1124</b>	<b>120 SK</b>	<b>CEMENT 50/50 2%</b>		<b>966.00</b>
		NITROGEN		
<b>5407</b>	<b>20 mi</b>	<b>TON-MILES Delivery</b>	<b>Tax</b>	<b>68.69</b>
				<b>190.00</b>
				<b>2075.00</b>

NSCO #15067

ESTIMATED TOTAL

CUSTOMER or AGENTS SIGNATURE

CIS FOREMAN Dwayne

CUSTOMER or AGENT (PLEASE PRINT)

DATE

171636