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KCC WICHITA

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

ORIGINAL

API NO. 15- _____

County Allen

w/2 SW SW. Sec. 4 Twp. 25 Rge. 19

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

4950 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 Storrer Well # 2

Field Name Iola

Producing Formation Bartlesville

Elevation: Ground na KB _____

Total Depth 891 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 _____ w/ _____ ex cnt.

Drilling Fluid Management Plan alt. J KGR 1/14/08
(Data must be collected from the Reserve Pit)

chloride content _____ ppm Fluid volume _____ bbls

De-watering 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

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, USV, 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. _____

1/1/01 1/15/02 1/15/02
 Spud Date Date Reached TD Completion 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 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 11 day of February 2002.

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

G Wireline Log Received

C Geologist Report Received

Distribution

KCC SWD/Rep KSPA

KGS Plug Other (Specify)

Operator Name N&B Enterprises

Lease Name Storrer

Well # 2

Sec. 4 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 & clay	0	9	
lime w/shale	9	249	
shale w/lime st.	249	611	
shale	611	854	
sand	854	891 TD	

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"	7 5/8"	20	20'	Portland	5 none	
production	6 3/4"	4 1/2"	10	866'	Portland	109	50/50 pos

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 Plugs 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	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		na		

Date of First, Resumed Production, SUD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil Sbls.	Gas Mcf	Water Sbls.	Gas-Oil Ratio	Gravity
		10			

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
OIL WELL
SERVICES
AN INFINITY COMPANY

ORIGINAL
TICKET NUMBER **15581**

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

LOCATION Chanute

FIELD TICKET

Store

DATE	CUSTOMER ACCT #	WELL NAME	QTR/QTR	SECTION	TWP	RGE	COUNTY	FORMATION
10-6-01	5625	#2					AL	
CHARGE TO				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				
<i>NJB Enterprises</i>								
<i>P.O. Box 812</i>								
<i>Chanute KS 66720</i>								

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401-10	1	PUMP CHARGE <i>cement pump</i>		525.00
5402-10	867'	Casing footage		121.38
1118-10	2825	gel		23.60
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		BLENDING & HANDLING		
		TON-MILES		
		STAND BY TIME		
5407-10	22 miles	MILEAGE		190.00
		WATER TRANSPORTS		
5502-10	8 hrs	VACUUM TRUCKS		140.00
		FRAC SAND		
1124-10	109525	CEMENT <i>50/50 port</i>		877.45
			SALES TAX	62.12
			ESTIMATED TOTAL	1939.60

Ravin 2790

CUSTOMER or AGENTS SIGNATURE _____

CIS FOREMAN _____

[Signature]

CUSTOMER or AGENT (PLEASE PRINT) _____

DATE 10-6-01

175649