

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

ORIGINAL

API NO. 15- 109-20,601-0001
County Logan
SE - SE - SE Sec. 22 Twp. 11S Rge. 33
440' Feet from (S)N (circle one) Line of Section
330' Feet from (E)W (circle one) Line of Section

Operator: License # 31120
Name: Pelican Hill Oil & Gas, Inc.
Address 1401 N. El Camino Real, #207
City/State/Zip San Clemente, CA 92672
Purchaser:
Operator Contact Person: Al Gross
Phone (714) 498-2101
Contractor: Name: Abercrombie RTD, Inc.
License: 30684
Wellsite Geologist:

Footages Calculated from Nearest Outside Section Corner:
NE, (SE), NW or SW (circle one)
Lease Name Washdown (OWO) Well # 1
Field Name Wildcat
Producing Formation None
Elevation: Ground 3140' KB 3145'
Total Depth 2396' PBTD
Amount of Surface Pipe Set and Cemented at _____ Feet
Multiple Stage Cementing Collar Used? Yes X No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.

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

Drilling Fluid Management Plan UNSUCCESSFUL REENTRY JK 10-6-97
(Data must be collected from the Reserve Pit)

If Workover:
Operator: Pelican Hill Oil & Gas, Inc.
Well Name: Scheetz
Comp. Date 11-20-95 Old Total Depth 4675'
Deepening Re-perf. Conv. to Inj/SWD
Plug Back PBTD
Commingled Docket No.
Dual Completion Docket No.
Other (SWD or Inj?) Docket No.
07-15-97 07-17-97 07-17-97
Date of REENTRY Date Reached TD Completion Date

Chloride content 300 ppm Fluid volume 600 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, 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 Allen Brown
Title President Date 9/2/97
Subscribed and sworn to before me this 2nd day of SEPT, 1997.
Notary Public Mary J. Miller
Date Commission Expires Nov 19, 1999

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



Operator Name Pelican Hill Oil & Gas, Inc. Lease Name Washdown (OWWO) Well # 1
 Sec. 22 Twp. 11S Rge. 33 East County Logan
 West

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	None	
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E.Logs Run:			

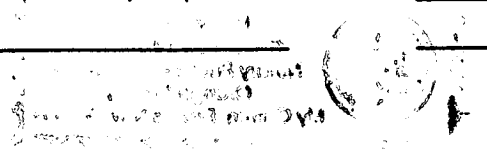
CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs./Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

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 checked="" type="checkbox"/> Plug Off Zone	1640'	Rathole 60/40pps	165	6% gel, Flo Seal 41#

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

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD 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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
	N/A	N/A	N/A	N/A	N/A		

Disposition of Gas: **METHOD OF COMPLETION** N/A **Production Interval**
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____



15-109-20601-00-01

ALLIED CEMENTING CO., INC.

8243

TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:

OAKLEY

ORIGINAL

DATE <u>7-17-97</u>	SEC. <u>23</u>	TWP. <u>11S</u>	RANGE <u>33W</u>	CALLED OUT	ON LOCATION <u>1:50 PM</u>	JOB START <u>2:30 PM</u>	JOB FINISH <u>4:30 PM</u>
LEASE <u>DWDD</u>	WELL # <u>1</u>	LOCATION <u>OAKLEY 6w-35</u>			COUNTY <u>LOGAN</u>	STATE <u>Ks</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR ABERCROMBIE RFD #8 OWNER SAME

TYPE OF JOB PTA

HOLE SIZE 7 7/8" T.D. 2396'

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2" DEPTH 1640'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

CEMENT AMOUNT ORDERED 165 SKS 6 1/4" 40' PER SK @ 1.50 SEAL

COMMON 99 SKS @ 7.20 712.80

POZMIX 66 SKS @ 3.15 207.90

GEL 9 SKS @ 9.50 85.50

CHLORIDE _____ @ _____

Flo-Seal 41TF @ 1.15 47.15

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING 165 SKS @ 1.05 173.25

MILEAGE 4¢ per SK/mile 80.00

TOTAL 1,306.60

EQUIPMENT

PUMP TRUCK CEMENTER TERRY

300 HELPER WAYNE

BULK TRUCK _____

315 DRIVER ANDREW

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

MIX 100 SKS AT 1640'

MIX 40 SKS AT 310'

MIX 10 SKS AT 40'

MIX 15 SKS AT HOLES

THANK YOU

SERVICE

DEPTH OF JOB 1640'

PUMP TRUCK CHARGE 445.00

EXTRA FOOTAGE _____ @ _____

MILEAGE 9 miles @ 2.82 25.38

PLUG 5 7/8" DRY HOLES @ 23.00

_____ @ _____

_____ @ _____

TOTAL 493.65

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____

RECEIVED
KANSAS COMP. CO.
MAY 17 1997
9-8-1997
IF PAID IN 30 DAYS

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.

SIGNATURE Anthony Mart

PRINTED NAME _____