

ORIGINAL

025778

SIDE ONE

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

75" H.

API NO. 15- 163-23,074 -0000
County Rooks
SW NE NE Sec. 18 Twp. 10 Rge. 19W East West

Operator: License # 6273

Name: Robert R. Price Operating, Inc.

Address P. O. Box 470442

Tulsa, Oklahoma 74147

City/State/Zip Tulsa, OK 74147

Purchaser: _____

Operator Contact Person: Robert R. Price

Phone (918) 492-1694

Contractor: Name: Red Tiger Drilling

License: 5302

Wellsite Geologist: Robert R. Price

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If OWMO: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth 416

Drilling Method:

Mud Rotary Air Rotary Cable

1-9-90 1-16-90 2-17-90
Spud Date Date Reached TD Completion Date

4290 Ft. North from Southeast Corner of Section

915 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

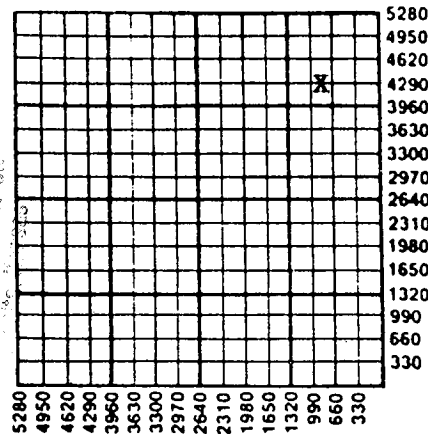
Lease Name Anderson Well # 12

Field Name Marcotte

Injection formation Arbuckle

Elevation: Ground 2212' KB 2217'

Total Depth 4041' PBDT 3986'



Amount of Surface Pipe Set and Cemented at 212 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 4041'
185 sx 60-40

feet depth to Surface w/ 150 sx surfill sx cmt. 810
475 sx Thrifty mix sx.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 [Signature]

Title President Date 2-23-90

Subscribed and sworn to before me this 23rd day of February, 19 90.

Notary Public [Signature]

Date Commission Expires 12-26-92

Laura Gorrell
My Commission Expires Dec. 26, 1992

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

SIDE TWO

Operator Name Robert R. Price Operating Lease Name Anderson Well # 12
 East County Rooks
 Sec. 18 Twp. 10 Rge. 19W 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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: center;">Formation Description</th> </tr> <tr> <td></td> <td style="text-align: center;"><input checked="" type="checkbox"/> Log</td> <td style="text-align: center;"><input type="checkbox"/> Sample</td> </tr> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> <tr> <td>Anhydrite</td> <td style="text-align: center;">1634</td> <td style="text-align: center;">1668</td> </tr> <tr> <td>Topeka</td> <td style="text-align: center;">3216</td> <td style="text-align: center;">3423</td> </tr> <tr> <td>Heebner</td> <td style="text-align: center;">3423</td> <td style="text-align: center;">3428</td> </tr> <tr> <td>Toronto</td> <td style="text-align: center;">3447</td> <td style="text-align: center;">3457</td> </tr> <tr> <td>Lansing-Kansas City</td> <td style="text-align: center;">3463</td> <td style="text-align: center;">3694</td> </tr> <tr> <td>Conglomerate</td> <td style="text-align: center;">3704</td> <td style="text-align: center;">3760</td> </tr> <tr> <td>Conglomerate Sand</td> <td style="text-align: center;">3766</td> <td style="text-align: center;">3776</td> </tr> <tr> <td>Arbuckle</td> <td style="text-align: center;">3780</td> <td style="text-align: center;">4041 (TD)</td> </tr> </table>	Formation Description				<input checked="" type="checkbox"/> Log	<input type="checkbox"/> Sample	Name	Top	Bottom	Anhydrite	1634	1668	Topeka	3216	3423	Heebner	3423	3428	Toronto	3447	3457	Lansing-Kansas City	3463	3694	Conglomerate	3704	3760	Conglomerate Sand	3766	3776	Arbuckle	3780	4041 (TD)
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CASING RECORD <input checked="" type="checkbox"/> New <input checked="" type="checkbox"/> Used <u>5 1/2"</u> used <u>8 5/8" new</u>							
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	12 1/4	8 5/8	20#	212	60/40 poz	140	2%gel, 3%cc
production	7 7/8	5 1/2	14#	4040	Thrifty 60-40 Surfill	475 185 150	1/4# celloflake per sack
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			
Shots Per Foot	Specify Footage of Each Interval Perforated						
1	3960-3980			1,000 gallons, 15% HCL		3960-3980	
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size		Set At		Packer At			
2" fiberglass		3970'					
Date of First Production	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) <u>SWD</u>						
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____