

ORIGINAL

ORIGINAL

SIDE ONE

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

Operator: License # 7448
Name: Burch Exploration, Inc.
Address: 11225 S. Edinborough Way

City/State/Zip Parker, CO 80134
Purchaser: Clear Creek, Inc.

Operator Contact Person: J. David Burch
Phone (303) 841-9417

Contractor: Name: Western Kansas Drilling
License: 4083 STATE CORPORATION COMMISSION

Wellsite Geologist: Ronald T. Mackey
JUL 5 1990

Designate Type of Completion
 New Well Re-Entry Workover
 Oil S.W.D. Temp. Abd.
 Gas Inj. Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If O.W.O.: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

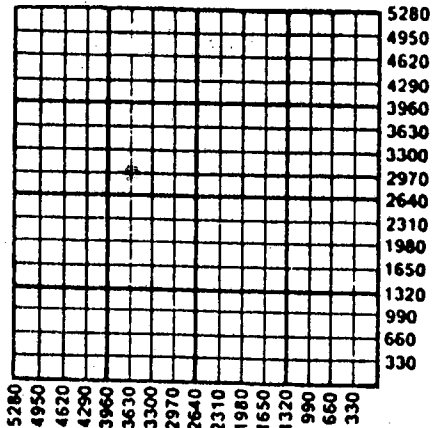
Drilling Method:
 Mud Rotary Air Rotary Cable
12-23-89 1-1-90 1-2-90
Spud Date Date Reached TD Completion Date

API NO. 15- 065-22,551-0000
County Graham

SW SE NW Sec. 08 Twp. 10 Rge. 23 East West
2970 ✓ Ft. North from Southeast Corner of Section
3630 ✓ Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Dietz Well # 2
Field Name Hoof West

Producing Formation Lansing-K.C.
Elevation: Ground 2422 KB 2427
Total Depth 4020 PBTD 4020



Amount of Surface Pipe Set and Cemented at 228 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 4020
feet depth to 0 w/ 450 sx cm.

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 J. David Burch
Title PRES Date 7/2/90
Subscribed and sworn to before me this 2nd day of July, 19 90.
Notary Public Conrad J. Decker
Date Commission Expires 8-18-93

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

15-065-22551-0000

ORIGINAL

SIDE TWO

Operator Name Burch Exploration, Inc. Lease Name Dietz Well # 2
 Sec. 08 Twp. 10 Rge. 23 East West
 County Graham

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.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets.)</p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)</p> <p>1. 3904-3922, 15-30-60-60, FFP 298-428 SFP 480-830 SIP 1101-1039, 180ftOCW 30% Oil 300ftOCGW 40% Oil 940ftOCW 40% Oil 620ftSW</p> <p>2. 3934-3962, 15-30-30-45, FFP 86-96 SFP 425-144 SIP 586-586 210ft SW</p>	<p style="text-align: center;">Formation Description</p> <p><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>2020</td> <td></td> </tr> <tr> <td>Heebner</td> <td>3722</td> <td></td> </tr> <tr> <td>Toronto</td> <td>3745</td> <td></td> </tr> <tr> <td>Lansing-K.C.</td> <td>3756</td> <td></td> </tr> <tr> <td>Base Lansing-K.C.</td> <td>3984</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Anhydrite	2020		Heebner	3722		Toronto	3745		Lansing-K.C.	3756		Base Lansing-K.C.	3984	
Name	Top	Bottom																	
Anhydrite	2020																		
Heebner	3722																		
Toronto	3745																		
Lansing-K.C.	3756																		
Base Lansing-K.C.	3984																		

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	12 1/4	8 5/8	23#	228			
Production	7 7/8	5 1/2	14.5	4020	Common	228	Cal Seal 2%
					Pozmix A	122	2% Gel

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
Shots Per Foot	Specify Footage of Each Interval Perforated	Depth	
4	3914-3920	500 Gal MCA, 2500 Gal Non E	
4	3952-3956	500 Gal MCA	

TUBING RECORD Size 2 7/8 Set At 3950 Packer At _____ Liner Run Yes No

Date of First Production 2-5-90 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil 58 Bbls. Gas 0 Mcf Water 220 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 3914-3956

RECEIVED
 STATE CORPORATION COMMISSION

JUL - 5 1990

CONSERVATION DIVISION
 Wichita, Kansas

HALLIBURTON SERVICES

INVOICE

A Halliburton Company

ORIGINAL

INVOICE NO.	DATE
878653	01/02/1990

WELL LEASE NO./PLANT NAME		WELL/PLANT LOCATION		STATE	WELL/PLANT OWNER
DIETZ 2		GRAHAM		KS	SAME
SERVICE LOCATION		CONTRACTOR	JOB PURPOSE		TICKET DATE
HAYS		WKD	CEMENT PRODUCTION CASING		01/02/1990
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
113301	MELVIN L. TAYLOR			COMPANY TRUCK	88239

BURCH OIL EXPL
 11225 EDINBOROUGH WAY
 PARKER, CO 80134

DIRECT CORRESPONDENCE TO:
 SUITE 500
 COLORADO DERBY BUILDING
 WICHITA, KS 67202-0000

PRICE REF. NO.	DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMOUNT
	DISCOUNT-(BID)				1,412.62-
	INVOICE BID AMOUNT				5,099.47
	*-KANSAS STATE SALES TAX				176.00
	*-HAYS CITY SALES TAX				20.72
INVOICE TOTAL - PLEASE PAY THIS AMOUNT					\$5,296.19

RECEIVED
 STATE CORPORATION COMMISSION
 SEP 12 1990
 CONSERVATION DIVISION
 Wichita, Kansas

AFFIX JOB TKT

TERMS INVOICES PAYABLE NET BY THE 20TH OF THE FOLLOWING MONTH AFTER DATE OF INVOICE. UPON CUSTOMER'S DEFAULT IN PAYMENT OF CUSTOMER'S ACCOUNT BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE INVOICE IS DATED, CUSTOMER AGREES TO PAY INTEREST THEREON AFTER DEFAULT AT THE HIGHEST LAWFUL CONTRACT RATE APPLICABLE BUT NEVER TO EXCEED 18% PER ANNUM. IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY TO ENFORCE COLLECTION OF SAID ACCOUNT, CUSTOMER AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY FEES IN THE AMOUNT OF 20% OF THE AMOUNT OF THE UNPAID ACCOUNT.

HALLIBURTON SERVICES

INVOICE

A Halliburton Company

INVOICE NO.	DATE
878553	01/02/1990

WELL LEASE NO./PLANT NAME		WELL/PLANT LOCATION		STATE	WELL/PLANT OWNER
DIETZ 2		GRAHAM		KS	SAME
SERVICE LOCATION		CONTRACTOR	JOB PURPOSE		TICKET DATE
HAYS		WKD	CEMENT PRODUCTION CASING		01/02/1990
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113301	MELVIN L. TAYLOR			COMPANY TRUCK	88239

ORIGINAL

BURCH OIL EXPL
 11225 EDINBOROUGH WAY
 PARKER, CO 80134

DIRECT CORRESPONDENCE TO:
 SUITE 600
 COLORADO DERBY BUILDING
 WICHITA, KS 67202-0000

PRICE REF. NO.	DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE	36	MI	2.20	79.20
		1	UNT		
001-016	CEMENTING CASING	4014	FT	1,056.00	1,056.00
		1	UNT		
030-018	CEMENTING PLUG SW, PLASTIC TOP	5	1/2 IN	53.00	53.00
12A	GUIDE SHOE - 5 1/2" - 8RD THD.	1	EA	104.00	104.00
825.205					
24A	INSERT FLOAT VALVE - 5 1/2" 8RD	1	EA	83.00	83.00
815.19251					
27	FILL-UP UNIT 5 1/2" - 6 5/8"	1	EA	30.00	30.00
815.19311					
40	CENTRALIZER 4-1/2" MODEL S-4	7	EA	41.00	287.00
807.93004					
320	CEMENT BASKET 5 1/2"	2	EA	90.00	180.00
800.8883					
504-308	STANDARD CEMENT	228	SK	5.45	1,242.60
506-105	POZMIX A	122	SK	2.88	351.36
506-121	HALLIBURTON-GEL 2%	5	SK	.00	N/C
507-277	HALLIBURTON-GEL BENTONITE	24	SK	13.00	312.00
507-285	ECONOLITE	600	LB	.82	492.00
504-308	STANDARD CEMENT	100	SK	5.45	545.00
509-968	SALT	780	LB	.073	56.94
508-127	CAL SEAL	5	SK	14.90	74.50
507-775	HALAD-322	71	LB	5.60	397.60
509-968	SALT	500	LB	.073	36.50
507-210	FLOCELE	88	LB	1.23	108.24
500-207	BULK SERVICE CHARGE	475	CFT	.95	451.25
500-306	MILEAGE CMTG MAT DEL OR RETURN	817.002	TMI	.70	571.90
	INVOICE SUBTOTAL				6,512.09

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 SEP 12 1990

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 Wichita, Kansas

***** CONTINUED ON NEXT PAGE *****

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