

AMENDED

ORIGINAL

FORM MUST BE TYPED

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 # 30606  
Name: Murfin Drilling Co., Inc.  
Address 250 N. Water, Suite 300  
City/State/Zip Wichita, KS 67202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Larry M. Jack  
Phone (316) 267-3241  
Contractor: Name: Murfin Drilling Co., Inc.  
License: 30606

Wellsite Geologist: Paul Gunzelman  
Designate Type of completion \* RE-COMPLETION  
       New Well        Re-Entry   X   Workover  
       Oil        SWD        SLOW        Temp. Abd.  
       Gas        ENHR        SIGW  
       Dry        Other (Core, WSW, Expl., Cathodic, etc)  
If Workover/Re-Entry: old well info as follows:  
Operator: MURFIN DRILLING CO. INC.  
Well Name: HANSEN "C" #14  
Comp. Date 12/15/99 Old Total Depth 3603  
       Deepening        Re-perf.        Conv. to Inj/SWD  
       Plug Back        PBTB  
       Commingled        Docket No. \_\_\_\_\_  
       Dual Completion        Docket No. \_\_\_\_\_  
  INJ   Other (SWD or Inj?)        Docket No. E-17919  
9/10/99 9/15/99 12/15/99  
Spud Date        Date Reached TD        Completion Date

API NO. 15- 147-20589-0000  
County Phillips  
C W2 Sec. 23 Twp. 5S Rge 20W X W E  
2640 2780 Feet from S/N (circle one) Line of Section  
3850 3965 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 HANSEN C Well # 14W  
Field Name Hansen  
Producing Formation LKC  
Elevation: Ground 2158 KB 2163  
Total Depth 3603 PBTB 3554  
Amount of Surface Pipe Set and Cemented at 288 Feet  
Multiple Stage Cementing Collar Used? X Yes        No  
If yes, show depth set 1646' Feet  
If Alternate II completion, cement circulated from \_\_\_\_\_  
feet depth to surface w/ 190 sx cmt.  
Drilling Fluid Management Plan OWWO KGR 12/14/07  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume 2500 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. \_\_\_\_\_

RECEIVED  
KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
Wichita, Kansas  
MAR 22 2001

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 Larry M. Jack  
Title Larry M. Jack, Production Manager Date 3/21/01  
Subscribed and sworn to before me this 21st day of March 2001  
Notary Public Barbara J. Dodson  
Barbara J. Dodson  
Date Commission Expires 12/16/03

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)

BARBARA J. DODSON  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. 12-16-03

Form ACO-1 (7-91)

X

Operator name Murfin Drilling Co., Inc.

Lease Name HANSEN C Well # 14W

Sec. 23 Twp. 5 S Rge. 20

East  
 West

County Phillips

**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.Log  
Dual Induction log, Dual Compensated Porosity log  
Borehole Compensated Sonic Log

Log Formation (Top), Depth and Datums  Sample  
Name Top Datum

CASING RECORD <u>New</u> <u>Used</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"	24#	288'	60/40 Poz	180	3% cc, 2% gel
Production	7 7/8"	5 1/2"	15.5#	3596	PC& MIDCON	370	

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: _ Perforate _ Protect Csg _ Plug Back TD _ Plug Off Zone	Depth Top/Btm	Type of Cement	# Sacks Used	Type and Percent Additives

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
4	3280-84, 3297-3302, 3314-18, 3321-24, 3336-40,	TREAT ALL LKC ZONES 3412-3280 W/2600	
	3408-12 LKC	GAL 15% NE ACID 750 GALS. 15% MCA	
	3504-14 ARBUCKLE		

TUBING RECORD	Size 2 7/8	Set At 3514	Packer At	Liner <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other SWAB TEST
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Estimated Production Per 24 Hours	Oil 40 Bbls	Gas Mcf	Water 100 Bbls	Gas-Oil Ratio	Gravity
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Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented  Sold  Used on Lease  
(If vented, submit ACO-18.)

Open Hole  Perf.  Dually Comp.  Commingled  
 Other (Specify)

AS ABOVE