

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

Operator: License # 4145

Name: Roberts & Murphy, Inc.

Address P. O. Box 7125

1500 N. Market

City/State/Zip Shreveport, LA 71137-7125

Purchaser: N/A

Operator Contact Person: Brad Cummings

Phone (318) 221-8601

Contractor: Name: Eagle Drilling

License: 5380

Wellsite Geologist: Scott Martin

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, MSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: RELEASED
4-9-1996

Well Name: APR 9 1996

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. _____

01/05/95 01/22/95 N/A
Spud Date 1-9-95 Date Reached TD Completion Date.

API NO. 15- 033,20,900

County Comanche

N/2 SW SW Sec. 35 Twp. 34S Rng. 20 E

950 Feet from S/N (circle one) Line of Section

660 Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name BAKER Well # 3-35

Field Name BOX RANCH

Producing Formation None

Elevation: Ground 1717' KB 1730'

Total Depth 6500' PSTD 6500'

Amount of Surface Pipe Set and Cemented at 80 64 5 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 cmt.

Drilling Fluid Management Plan ALTI
(Data must be collected from the Reserve Pit)

Chloride content 2800 ppm Fluid volume 1370 bbls.

Dewatering method used Hauled to Disposal

Location of fluid disposal if hauled offsite: _____

Operator Name KBW Oil Company

Lease Name Harmon SWD #1 License No. 5993

NW Quarter Sec. 11 Twp. 33 S Rng. 20 E

County Comanche Docket No. 98329

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Scott Martin

Title Geologist Date 02/09/95

Subscribed and sworn to before me this 10th day of February, 1995.

Notary Public Matthew A. Olsenholt

Date Commission Expires indefinite

My Commission is for Life

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)

STATE CORPORATION COMMISSION
2-13-1995
FEB 13 1995

Operator Name Roberts & Murphy, Inc.

Lease Name BAKER

Well # 3-35

Sec. 35 Twp. 34 Rge. 20

East

County Comanche

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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	4174	-2444
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	T. Lansing K/C	4376	-2646
List All E.Logs Run:		B. Lansing K/C	4918	-3188
		Miss	5220	-3490
		Viola	6288	-4566
		Simpson	6458	-4728

Dual, GR, Microlog, CNL Den, Sonic

CASING RECORD <input checked="" 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
Conductor	24"	20"		78'		9yds	
Surface	12 1/2"	8 5/8"	24lbs/Ft.	645'	Lite Class A	250 100	

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 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

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

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 _____

ALLIED CEMENTING CO., INC.

0963

15-033-20900-00-00

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

CONFIDENTIAL

SERVICE POINT:

Medicine Lodge KS

ORIGINAL

DATE <i>1-22-95</i>	SEC. <i>35</i>	TWP. <i>24S</i>	RANGE <i>2W</i>	CALLED OUT <i>12:00 AM</i>	ON LOCATION <i>6:30</i>	JOB START <i>8:30</i>	JOB FINISH <i>10:30</i>
LEASE <i>BAHET</i>	WELL# <i>2-35</i>	LOCATION <i>PROTECTION 10 1/2 S, E/S INTO</i>			COUNTY <i>COMANCHE</i>	STATE <i>KANSAS</i>	

OLD OR NEW (Circle one)

CONTRACTOR <i>Eagle Drilling Co. INC</i>	OWNER <i>Roberts & Murphy INC</i>
TYPE OF JOB <i>Rotary Plug</i>	CEMENT
HOLE SIZE <i>7 7/8</i>	T.D. <i>6500</i>
CASING SIZE <i>8 5/8</i>	DEPTH <i>643</i>
TUBING SIZE	DEPTH
DRILL PIPE <i>4 1/2</i>	DEPTH <i>850</i>
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	

AMOUNT ORDERED *125 60/40 po2 6% GEL*

COMMON <i>75</i>	@	<i>6.10</i>	<i>457.50</i>
POZMIX <i>50</i>	@	<i>3.15</i>	<i>157.50</i>
GEL <i>6</i>	@	<i>9.50</i>	<i>57.00</i>
CHLORIDE	@		
	@		
	@		
	@		
	@		
	@		
HANDLING <i>125</i>	@	<i>1.05</i>	<i>131.25</i>
MILEAGE <i>60</i>			<i>300.00</i>
TOTAL			<i>1103.25</i>

EQUIPMENT

PUMP TRUCK	CEMENTER <i>NEAL R.</i>
# <i>266</i>	HELPER <i>CARL B.</i>
BULK TRUCK	
# <i>227</i>	DRIVER <i>MARK B.</i>
BULK TRUCK	
#	DRIVER

REMARKS:

<i>1st Plug @ 850' w/ 40SK</i>	DEPTH OF JOB <i>850'</i>
<i>2nd Plug @ 660' w/ 50SK</i>	PUMP TRUCK CHARGE <i>445.00</i>
<i>3rd Plug @ 40' w/ 10SK</i>	EXTRA FOOTAGE @
<i>Re-halt w/ 15SK</i>	MILEAGE <i>60</i> @ <i>2.35</i> <i>141.00</i>
<i>Mouse hole w/ 10SK</i>	PLUG @
<i>125 SK 60/40 po2 6% GEL</i>	@
<i>250</i>	@
	TOTAL <i>586.00</i>

SERVICE

CHARGE TO: *Roberts & Murphy INC*
STREET *PO Box 7125*
CITY *Shreveport* STATE *LA.* ZIP *71137*

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		
TOTAL			

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 *X [Signature]*

TAX *0*
TOTAL CHARGE *\$ 1689.25*
DISCOUNT *\$ 337.85* IF PAID IN 30 DAYS
\$ 1351.40
Net

RELEASED
4-9-1996
APR 9 1996

FROM CONFIDENTIAL

STATE COMMISSION
2-13-1995
FEB 13 1995
WICHITA, KANSAS