

RELEASED

CONFIDENTIAL

15-033-20821-00-00

ORIGINAL KCC

8-2-1993
AUG 0 2 1993

AUG 0 5
8-5
CONFIDENTIAL

SIDE ONE

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

API NO. 15- 033-20, 821 ✓
County Comanche ✓

S/2 NE NE Sec. 34 Twp. 34S Rge. 20 X East West

4530 Ft. North from Southeast Corner of Section
660 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Kuhns Well # 3
Field Name Box Ranch

Producing Formation Viola

Elevation: Ground 1718' KB 1730'

Total Depth 6500 PBDT 6276

Operator: License # 4145

Name: Roberts & Murphy, Inc.

Address P. O. Box 7125

1500 North Market

City/State/Zip Shreveport, LA 71137

Purchaser: KOCH/EGM

Operator Contact Person: J. Brad Cummings

Phone (318) 221-8601

Contractor: Name: TRIAD DRILLING

License: 7345

Wellsite Geologist: Lee T. Jenkins

Designate Type of Completion

X New Well Re-Entry Workover

Oil SWD Temp. Abd.

X Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWO: old well info as follows:

Operator:

Well Name:

Comp. Date Old Total Depth

Drilling Method:

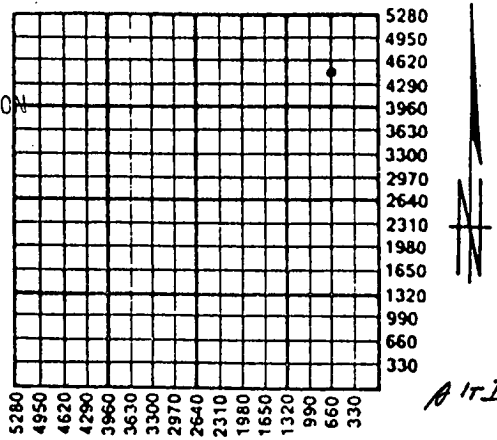
X Mud Rotary Air Rotary Cable

5/29/91 6/13/91 6/22/91

Spud Date Date Reached TD Completion Date

RECEIVED
STATE CORPORATION COMMISSION

12 1991
7-12-1991
WICHITA, KANSAS



Amount of Surface Pipe Set and Cemented at 650 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 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. Brad Cummings

Title Landman Date 7/10/91

Subscribed and sworn to before me this 10th day of July 1991.

Notary Public Sharon G. Fischer

Date Commission Expires SHARON G. FISCHER, Notary Public
Caddo Parish, Louisiana
My Commission Is for Life

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 Roberts & Murphy, Inc. Lease Name Kuhns Well # 3
 East. County Comanche
 Sec. 34 Twp. 34 S Rge. 20 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 checked="" type="checkbox"/> Yes <input 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.) DST #1 6152 - 6183 5-30-5-90 IHP 3064 IFP 2121-2242 ISIP 2450 FFP 2121-2336 FSIP 2989 Rec GTS in 1 minute 5' Condensate	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">Formation Description</th> </tr> <tr> <th style="width:60%;"></th> <th style="width:20%; text-align: center;"><input checked="" type="checkbox"/> Log</th> <th style="width:20%; text-align: center;"><input type="checkbox"/> Sample</th> </tr> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Heebner</td> <td style="text-align: center;">-4138</td> <td></td> </tr> <tr> <td>Lansing K/C</td> <td style="text-align: center;">-4325</td> <td></td> </tr> <tr> <td>Cherokee</td> <td style="text-align: center;">-5040</td> <td></td> </tr> <tr> <td>Miss</td> <td style="text-align: center;">-5180</td> <td></td> </tr> <tr> <td>Viola</td> <td style="text-align: center;">-6140</td> <td></td> </tr> <tr> <td>Simpson</td> <td style="text-align: center;">-6300</td> <td></td> </tr> <tr> <td>Arbuckle</td> <td style="text-align: center;">-6425</td> <td></td> </tr> </tbody> </table>	Formation Description				<input checked="" type="checkbox"/> Log	<input type="checkbox"/> Sample	Name	Top	Bottom	Heebner	-4138		Lansing K/C	-4325		Cherokee	-5040		Miss	-5180		Viola	-6140		Simpson	-6300		Arbuckle	-6425	
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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
Conductor	30"	20"		80	Common	200	
Surface	2 5/8"	8 5/8"	24#	665	Common	528	
Production	7 7/8"	4 1/2"	10.5#	6351	50/50 Pozmix	150	

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4SPF	6162 - 6180		

TUBING RECORD				Liner Run
Size	Set At	Packer At		
2 3/8	6181	6081	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Date of First Production <u>6/22/91</u>	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. 2	Gas Mcf 1000	Water Bbls. 0
	Gas-Oil Ratio		Gravity 58°

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input checked="" type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perforation <input type="checkbox"/> Dually Completed <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	6162 - 6180