

RECEIVED
09-26-2001
SEP 26 2001

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

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

API NO. 15- 109-20,684-00-00
County Logan
SE - SE - SE Sec. 14 Twp. 12S Rge. 33 X E

Operator: License # 5135
Name: John O. Farmer, Inc.
Address P.O. Box 352
City/State/Zip Russell, KS 67665

Purchaser: _____

Operator Contact Person: John O. Farmer III
Phone (785) 483-3144

Contractor: Name: Murfin Drilling Co., Inc.
License: 30606

Wellsite Geologist: Craig Caulk

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SLOW Temp. Abd.

Gas ENHR SIGM

Dry Other (Core, WSW, Expl., Cathodic, etc.)

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

Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back _____ PBTB

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

Other (SWD or Inj?) _____ Docket No. _____

6-7-01 6-17-01 6-17-01
Spud Date Date Reached TD Completion Date

330 Feet from S/N (circle one) Line of Section
330 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 Voth Investment Well # 1
Field Name (wildcat)
Producing Formation _____

Elevation: Ground 3102' KB 3107'
Total Depth 4720' PBTB _____

Amount of Surface Pipe Set and Cemented at 219 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/ _____ sx cmt.

Drilling Fluid Management Plan 10-6-05
(Data must be collected from the Reserve Pit)

Chloride content 5,600 ppm Fluid volume 2,500 bbls
Dewatering method used allow to dry by evaporation

Location of fluid disposal if hauled offsite:

Operator Name NA

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

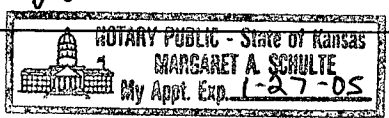
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market, Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on side 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 John O. Farmer III
John O. Farmer III
Title President Date 9-25-01
Subscribed and sworn to before me this 25th day of September,
20 01.

Notary Public Margaret A. Schulte
Margaret A. Schulte

Date Commission Expires _____



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)

SIDE TWO

Operator Name John O. Farmer, Inc. Lease Name Voth Investment Well # 1

East

County Logan

Sec. 14 Twp. 12S Rge. 33
 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.) Yes No

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run
 (Submit Copy.) Yes No

List All E.Logs Run:
 Dual Compensated Porosity Log
 Dual Induction Log

<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Name	Top	Datum
Anhydrite	2596'	(+511)
Base/Anhydrite	2618'	(+489)
Heebner Shale	4029'	(-922)
Lansing Lms.	4070'	(-963)
Stark Shale	4296'	(-1189)
Base/KC	4356'	(-1249)
Aitamont	4427'	(-1320)
Cherokee Shale	4580'	(-1473)
Johnson Lms.	4622'	(-1515)
Mississippi	4680'	(-1573)
L.T.D.	4720'	(-1613)

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#	219'	Common	160	3% C.C., 2% gel

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate	Top Bottom			
<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. 6941

Federal Tax I.D.#

15-109-20084-00-00 ORIGINAL
SERVICE POINT: Oakley

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

DATE <u>6-7-01</u>	SEC <u>14</u>	TWP. <u>12</u>	RANGE <u>33</u>	CALLED OUT	ON LOCATION <u>8:25 PM</u>	JOB START <u>8:45 PM</u>	JOB FINISH <u>9:00 PM</u>
Voth Investment				WELL # <u>1</u>	LOCATION <u>Oakley 95.5 W 1 W</u>	COUNTY <u>Logan</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)							

CONTRACTOR Murfin Drlg Rig 16
 TYPE OF JOB Surface
 HOLE SIZE 12 1/4 T.D. 220'
 CASING SIZE 8 3/8 DEPTH 219'
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. 15'
 PERFS.
 DISPLACEMENT 13 Bbls
 EQUIPMENT
 PUMP TRUCK CEMENTER Dean
 # 191 HELPER Andrew
 BULK TRUCK
 # 315 DRIVER Jarrod
 BULK TRUCK
 # DRIVER

OWNER Same
 CEMENT AMOUNT ORDERED
160 SKs com 3 3/4 CC 2 1/2 Gel
 COMMON 160 SKs @ 7.85 1,256.00
 POZMIX @
 GEL 3 SKs @ 10.00 30.00
 CHLORIDE 6 SKs @ 30.00 180.00
 @
 @
 @
 @
 @
 @
 HANDLING 169 SKs @ 1.10 185.90
 MILEAGE 4 1/2 per SK/mile 101.25
 TOTAL 1,753.15

COPY

REMARKS:

SERVICE

Cement did circulate ✓
Circulate 5 Bbls to pit
Thank you

DEPTH OF JOB	<u>219'</u>	
PUMP TRUCK CHARGE		<u>520.00</u>
EXTRA FOOTAGE	@	
MILEAGE <u>15 miles</u>	@ <u>3.00</u>	<u>45.00</u>
PLUG <u>8 3/8 Surface</u>	@	<u>45.00</u>
	@	
	@	

RECEIVED

SEP 26 2001

TOTAL 610.00

CHARGE TO: John O. Farmer
 STREET _____
 CITY _____ STATE _____ ZIP _____

KCC WICHITA

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.

TAX _____
 TOTAL CHARGE _____
 DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Bill Wynn

Bill Wynn
 PRINTED NAME

Thanks

ALLIED CEMENTING CO., INC. 7039

Federal Tax I.D.#

15-109-20684-00-00

ORIGINAL

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

SERVICE POINT:
Oakley

DATE <u>6-17-01</u>	SEC. <u>14</u>	TWP. <u>12 S</u>	RANGE <u>33 W</u>	CALLED OUT	ON LOCATION <u>Midnight</u>	JOB START <u>12:15 AM</u>	JOB FINISH <u>3:00 AM</u>
LEASE <u>Investment</u> WELL # <u>1</u>				LOCATION <u>Oakley 95-5U-1N</u>		COUNTY <u>Logan</u>	STATE <u>Kan</u>
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

COPY

CONTRACTOR Mur Fin Drly Co #16

TYPE OF JOB PTA

HOLE SIZE 7 7/8 T.D.

CASING SIZE DEPTH

TUBING SIZE DEPTH

DRILL PIPE 4 1/2 xH DEPTH 2610'

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER Same

CEMENT

AMOUNT ORDERED 200 SKs 69/40 per
6 9/16 Gal, 1/4" Flo-Seal

COMMON	<u>120 SKs</u>	@	<u>7.85</u>	<u>942.00</u>
POZMIX	<u>80 SKs</u>	@	<u>3.55</u>	<u>284.00</u>
GEL	<u>10 SKs</u>	@	<u>10.00</u>	<u>100.00</u>
CHLORIDE		@		
	<u>Flo-Seal 50#</u>	@	<u>1.40</u>	<u>70.00</u>
		@		
		@		
		@		
		@		
HANDLING	<u>212 SKs</u>	@	<u>1.10</u>	<u>233.20</u>
MILEAGE	<u>44 per SK/mile</u>			<u>127.20</u>
TOTAL				<u>1,756.40</u>

EQUIPMENT

PUMP TRUCK CEMENTER Walt

300 HELPER Wayne

BULK TRUCK

212 DRIVER Walt

BULK TRUCK

DRIVER

REMARKS:

SERVICE

25 SKs @ 2610'

100 SKs @ 1550'

40 SKs @ 269'

10 SKs @ 40'

10 SKs in M.H.

15 SKs in R.H.

DEPTH OF JOB 2610'

PUMP TRUCK CHARGE 630.00

EXTRA FOOTAGE @

MILEAGE 15 miles @ 3.00 45.00

PLUG 8 5/8 D-H Plug @ 23.00

RECEIVED

TOTAL 698.00

SEP 26 2001

CHARGE TO: John O. Farmer

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

KCC WICHITA @ _____

@ _____

@ _____

@ _____

@ _____

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.

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Bill Wynn

Bill Wynn
PRINTED NAME