

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

API NO. 15- 167-20,070-0000
County Russell
SE SE NW Sec. 7 Twp. 11S Rge. 15W E
W

2960 Feet from S (circle one) Line of Section
2770 Feet from S (circle one) Line of Section

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

Lease Name Elliott Well # 6-7
(Old Leo J. Dreiling #1 Albrecht
Field Name Fairport Northwest

Producing Formation Cedar Hills

Elevation: Ground 1911 KB _____

Total Depth 973' PBDT _____

Amount of Surface Pipe Set and Cemented at 162' Feet
Alternate 2 exception granted. 5-1/2" @ 971'
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 8-9-93
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W _____
County _____ Docket No. _____

Operator: License # 5134

Name: Graham-Michaelis Corp.

Address P.O. Box 247
Wichita, KS 67201

City/State/Zip _____

Purchaser: _____

Operator Contact Person: Jack L. Yinger

Phone (316) 264-8394

Contractor: Name: Maier Well Service

License: #3141 31073 RT KCC

Wellbit: Geologist: _____

Designate Type of Completion
____ New Well Re-Entry ____ Workover

____ Oil ____ SWD ____ S10W ____ Temp. Abd.
____ Gas ____ ENHR ____ S1GW
____ Dry Other (Core, WSW, Expl., Cathodic, etc)
water supply well

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

Operator: Leo J. Dreiling

Well Name: Albrecht #1

Comp. Date 6/20/67 Old Total Depth 3550'

____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PBDT
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
WSW Other (SWD or Inj?) Docket No. _____

6/14/93 6/15/93 7/12/93
Spud Date Date Reached TD Completion Date

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 Jack L. Yinger

Title Jack L. Yinger, Vice President Date 7/16/93

Subscribed and sworn to before me this 16th day of July
19 93

Notary Public Aldine M. Johnson

Date Commission Expires _____

 **Aldine M. Johnson**
NOTARY PUBLIC
State of Kansas
MY APPT. EXPIRES 3-19-97

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
RECEIVED
STATE CORPORATION COMMISSION
KCPA
JUL 28 1993
7-28-93
DISTRIBUTION
 KCC
 KGS
 SVD/Rep
 Plug
Other
Wichita, Kansas
Form ACO-1 (7-91)

Operator Name Graham-Michaelis Corp. Lease Name Elliott Well # 6-7

Sec. 7 Twp. 11S Rge. 15W East County Russell

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 type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No			
List All E.Logs Run:				

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
Surface		8-5/8"		162'			
Production		5-1/2"		971'		200	

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate	0 - 971		200	60/40 poz mix - 6% gel
<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	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth
1	620 - 720', 500 - 560'	

TUBING RECORD	Size <u>2-7/8"</u>	Set At <u>402.79'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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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)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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 _____

1309
ORIGINAL

TO: Graham Michaelis Corp.
P. O. Box 232
Russell, KS 67665

INVOICE NO. 64128
PURCHASE ORDER NO. _____
Chrisler/Elliott/Bowby Waterflood
LEASE NAME Elliott #6-7
DATE June 15, 1993

ALLIED CEMENTING CO., INC.
Home Office P. O. Box 31
Russell, Kansas 67665

RECEIVED
STATE CORPORATE SECURITIES
DIVISION
KANSAS
JUN 22 1993
4:12 PM

RECEIVED

JUN 22 1993

SERVICE AND MATERIALS AS FOLLOWS:

Common 120 sks @\$5.75	Graham-Michaelis Corp.	
Pozmix 80 sks @\$3.00	Wichita Kansas	\$690.00
Gel 17 sks @\$7.00		240.00
		<u>119.00</u>
		\$1,049.00
Handling 200 sks @\$1.00		200.00
Mileage (26) @\$.04¢ per sk per mi		208.00
Production		525.00
Mi @\$2.25 pmp trk chg		58.50
1 plug		<u>45.00</u>
		1,036.50
1 Basket-----\$127.00	If account <u>CURRENT</u> 20% discount will	
3 Centralizers-----168.00	be allowed <u>ONLY</u> if paid within <u>30</u> days	
1 AFU Insert-----189.00	from date of invoice.	<u>609.00</u>
1 Guide Shoe-----125.00		
	Total	\$2,694.50
		- 538.90
		2,155.60

D.A. Beard
Thank you!

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1% Charged Thereafter.

New

Date <u>6-15-93</u>	Sec. <u>7</u>	Fwp. <u>11</u>	Range <u>15</u>	Called Out <u>11:30 AM</u>	On Location <u>3:00 PM</u>	Job Start	Finish
Lease <u>Elliott</u>	Well No. # <u>6-7</u>	Location <u>Fairport 4 1/2 mi N</u>	County <u>Russell</u>	State <u>Kans</u>	City <u>Russell</u>	Zip <u>67665</u>	
Contractor <u>Maier Well Service</u>	Owner <u>Simon</u>	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 listed.					
Type Job <u>Production</u>	Hole Size <u>7 7/8"</u>	T.D. <u>1000'</u>	Charge To <u>Graham Michaelis Corporation</u>	Street <u>P.O. Box 232</u>			
Csg. <u>5 1/2"</u>	Depth <u>982'</u>	Drill Pipe	City <u>Russell</u>	State <u>Kan</u> <u>67665</u>			
Tbg. Size	Depth	Tool	The above was done to satisfaction and supervision of owner agent or contractor.				
Cement Left in Csg. <u>10'</u>	Shoe Joint <u>10'</u>	Purchase Order No.	X <u>64128</u>				
Press Max.	Minimum	CEMENT <u>10 sacks Gul</u>					
Mess Line	Displace	Amount Ordered <u>200 sks 120 lbs @ 1.00 = 240.00</u>					
Perf.	EQUIPMENT						

Item No.	Cement	Helper	Driver	Sub Total	Total
Pumpmk					
Pumpmk #160					
Bulkmk					
Bulkmk					
DEPTH of Job					
Reference:					
<u>1</u>	<u>Pump Trk</u>			<u>525.00</u>	
	<u>1-5 1/2" Rubber Plug</u>			<u>45.00</u>	
	<u>225 Pecanite 36m</u>			<u>58.50</u>	
					<u>628.50</u>
Remarks:					
<u>W. T. Gosselby Cement and Grout</u>					
<u>Thermal Rubber - 1/2" dia - 110 x 2 x 10</u>					
<u>1000 gal - 1000 gal - 1000 gal</u>					
<u>Simon Therman Unit - 1000 gal</u>					
<u>Maier Well Service - 1000 gal</u>					

Item	Quantity	Price	Total
Handling	1.00	200.00	200.00
Mileage 36m	.04	208.00	208.00
			<u>1457.00</u>
Floating Equipment			
1 - Basket		127.00	127.00
3 - Centralizers		168.00	168.00
1 - AFU Insert		189.00	189.00
1 - Guide Shoe		125.00	125.00
			<u>609.00</u>

15-167-20070-0004