

ORIGINAL

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- 051-24, 645 4000

County Ellis

SE NE SE^L Sec. 18 Twp. 11S Rge. 16 X East West

1650 ✓ Ft. North from Southeast Corner of Section

330 ✓ Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Cress Estate ✓ Well # 1-18

Field Name Bemis

Producing Formation Arbuckle

Elevation: Ground _____ KB 1777

Total Depth 3370 PBD N/A

Operator: License # 30348

Name: Mays Drilling Co.

Address P.O. Box 62

City/State/Zip Great Bend, KS 67530

Purchaser: _____

Operator Contact Person: Sam Mays

Phone (316) 792-1255

Contractor: Name: same

License: _____

Wellsite Geologist: Jerry Green

Designate Type of Completion

- New Well Re-Entry Workover
- Oil SWD Temp. Abd.
- Gas Inj Delayed Comp.
- Dry Other (Core, Water Supply, etc.)

If OMWO: old well info as follows:

Operator: _____

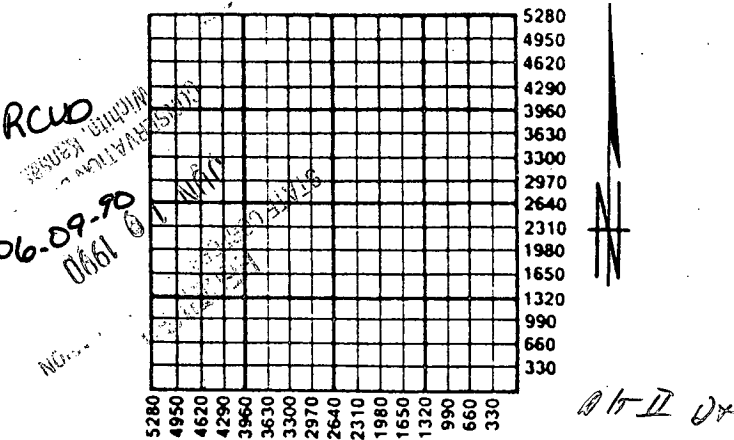
Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

- Mud Rotary Air Rotary Cable

4-09-90 4-16-90 4-16-90
Spud Date Date Reached TD Completion Date



Amount of Surface Pipe Set and Cemented at 229 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.

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 _____

Title Partner Date 06-15-90

Melva L. Shell
NOTARY PUBLIC
Subscribed and sworn to before me this 15 day of June, 1990
MY APPT. EXPIRES _____

Notary Public Melva L. Shell

Date Commission Expires 10-13-92

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 Mays Drilling Co. Lease Name Cress Estate Well # 1-18

Sec. 18 Twp. 11S Rge. 16 East West County Ellis

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 type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy.)	<p style="text-align: center;">Formation Description</p> <p style="text-align: center;"><input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample</p> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: left;">Top</th> <th style="text-align: left;">Bottom</th> </tr> </thead> <tbody> <tr><td>Anhydrite</td><td>-1004</td><td></td></tr> <tr><td>Topeka</td><td>- 934</td><td></td></tr> <tr><td>Heebner</td><td>-1168</td><td></td></tr> <tr><td>Toronto</td><td>-1191</td><td></td></tr> <tr><td>LKC</td><td>-1213</td><td></td></tr> <tr><td>B-KC</td><td>-1456</td><td></td></tr> <tr><td>Cong.</td><td>-1489</td><td></td></tr> <tr><td>Arbuckle</td><td>-1571</td><td></td></tr> <tr><td>RTD</td><td>-1593</td><td></td></tr> </tbody> </table>	Name	Top	Bottom	Anhydrite	-1004		Topeka	- 934		Heebner	-1168		Toronto	-1191		LKC	-1213		B-KC	-1456		Cong.	-1489		Arbuckle	-1571		RTD	-1593	
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	12 1/4	8-5/8	23#	229	60/40 Poz	140	3% cc
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(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 Production	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 AGO-18.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____

15-051-24645-0000

06-15-90

Cress Estate #1-18
Sec. 18-11S-16W
Ellis County, Ks

Mays Drilling Co.
P.O. Box 62
Great Bend, KS 67530

DST #1

45-45-45-45

1st	IFP	52 PSI	3140 Top	3188 Bottom
	ISIP	84 PSI		
2nd	IFP	52 PSI		
	FSIP	190 PSI		

RECEIVED
STATE DEPARTMENT OF
JUN 19 1990
CONSERVATION DIVISION
Wichita, Kansas