

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM  
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 5181  
Name DONALD C. SLAWSON  
Address 200 Douglas Building  
City/State/Zip Wichita, Kansas 67202

Purchaser.....

Operator Contact Person Bill Horigan  
Phone (316) 263-3201

Contractor: License # 5657  
Name SLAWSON DRILLING CO., INC.

Wellsite Geologist Jim Gribi  
Phone (316) 267-6248

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

If OWWO: old well info as follows:  
Operator.....  
Well Name.....  
Comp. Date.....Old Total Depth.....

WELL HISTORY

Drilling Method:  
 Mud Rotary  Air Rotary  Cable  
6/17/85 6/25/85 6/25/85  
Spud Date Date Reached TD Completion Date  
4676' .....

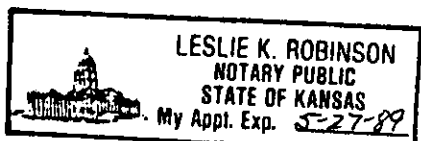
Amount of Surface Pipe Set and Cemented at 751 feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set.....feet  
If alternate 2 completion, cement circulated  
from.....feet depth to.....w/.....SX cmt

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. 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 William R. Horigan  
Title Kansas Operations Manager Date 6/26/85

Subscribed and sworn to before me this 26 day of June 1985  
Notary Public Leslie K. Robinson  
Date Commission Expires 5-27-89



API NO. 15-109-20,384-00-00  
County Logan  
SE NE NW Sec. 10 Twp. 13 Rge. 33  East  West

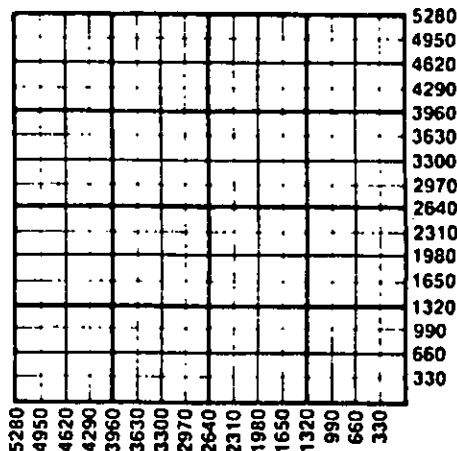
4280 Ft North from Southeast Corner of Section  
2970 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

Lease Name Kuhlman 'O' Well # 1

Field Name Wildcat

Producing Formation.....

Elevation: Ground 2997' KB 3003'  
Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water:  Disposal  Repressuring  
Docket # .....

Questions on this portion of the ACO-1 call:  
Water Resources Board (913) 296-3717

Source of Water:  
Division of Water Resources Permit #.....  
 Groundwater.....Ft North from Southeast Corner (Well) .....Ft West from Southeast Corner of Sec Twp Rge  East  West  
 Surface Water.....Ft North from Southeast Corner (Stream, pond etc).....Ft West from Southeast Corner Sec Twp Rge  East  West  
 Other (explain)..... (purchased from city, R.W.D. #)

K.C.C. OFFICE USE ONLY  
 Letter of Confidentiality Attached  
 Wireline Log Received  
 Drillers Timelog Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)  
RECEIVED  
STATE CORPORATION COMMISSION

06-18-1985 Form ACO-1 (7-84)  
CONSERVATION DIVISION  
Wichita, Kansas

15-109 - 20384 - 00-00

SIDE TWO

Operator Name Donald C. Slawson Lease Name Kuhlman "O" Well # 1

Sec. 10 Twp. 13S Rge. 33W  East  West County Logan

WELL LOG

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  Yes  No  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No

Formation Description  
 Log  Sample

Name Top Bottom

**CONFIDENTIAL**

L/T

ANHY	2472	(+531)		
B/ANH	2494	(+503)		
WAB	3504	(-561)	PWN	4401 (-1398)
HOW	3634	(-631)	MY ST	4442 (-1439)
TOP	3688	(-685)	FS	4458 (-1455)
LE CP	3830	(-827)	CHER	4486 (-1483)
HB	3911	(-908)	JZ	4532 (-1529)
TOR	3928	(-925)	MISS	4615 (-1612)
LSG	3946	(-943)	LTD	4677
MN CR	4122	(-1119)		
STK	4203	(-1200)		
HPKY	4235	(-1232)		
B/KC	4266	(-1263)		
MARM	4306	(-1303)		

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	12 1/4"	8 5/8"	24#	751'	60/40 poz	450	2% gel, 3% cc
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated					Depth	
				RELEASED			
				ACT 20 1977			
TUBING RECORD				Liner Run <input checked="" 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	Gas	Water	Gas-Oil Ratio		Gravity	
	Bbbs	MCF	Bbbs	CFPB			

METHOD OF COMPLETION

Production Interval

Disposition of gas:  Vented  Open Hole  Perforation  
 Sold  Other (Specify) .....  
 Used on Lease  Dually Completed .....  
 Commingled .....