

AFFIDAVIT AND COMPLETION FORM

ACO-1

This form must be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within five days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry, SWD, OWWO, injection. Please type. Complete ALL sections. Applications must be filed for dual completion, commingling, salt water disposal and injection. Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.) KCC#-(316) 263-3238.

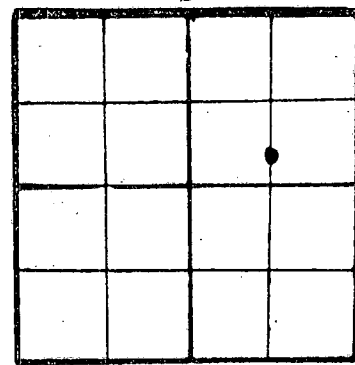
OPERATOR Edward P. Leiker API NO. 15-051-22-838-00-00
 ADDRESS Munjour Route, Box 17 COUNTY Ellis
Hays, KS 67601 FIELD Leiker
 **CONTACT PERSON Edward P. Leiker LEASE Leiker E
 PHONE 913-625-5310

PURCHASER _____ WELL NO. 1
 ADDRESS _____ WELL LOCATION C-N2/N2/SW
330 Ft. from S Line and
1000 Ft. from W Line of
 the N2/SW SEC. 24 TWP. 14 RGE. 18

DRILLING CONTRACTOR Emphasis
 ADDRESS Russell, KS

PLUGGING CONTRACTOR _____
 ADDRESS _____

TOTAL DEPTH 3555 PBTD _____
 SPUD DATE 02-02-82 DATE COMPLETED 02-13-82
 ELEV: GR _____ DF _____ KB 1957



WELL PLAT
Quarter
 or (Full)
 Section -
 Please
 indicate.

KCC
 KGS
 MISC. _____

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS
 Report of all strings set - surface, intermediate, production, etc. (New)/(Used) casing.

| Purpose of string | Size hole drilled | Size casing set (in O.D.) | Weight lbs/ft. | Setting depth | Type cement | Sacks | Type and percent additives |
|-------------------|-------------------|---------------------------|----------------|---------------|-------------|-------|----------------------------|
| Surface | 12 3/4 | 8 5/8 | 24# | 1149 | Common | 420 | |
| Casing | 7 7/8 | 4 1/2 | 9 1/2# | 3555 | Common | 150 | |
| | | | | | | | |
| | | | | | | | |

| LINER RECORD | | | PERFORATION RECORD | | |
|---------------|---------------|---------------|--------------------|-------------|----------------|
| Top, ft. | Bottom, ft. | Sacks cement | Shots per ft. | Size & type | Depth interval |
| | | | 1 hole each | 1 jet | 3275-3302 3324 |
| TUBING RECORD | | | 1 hole each | 1 each jet | 3434-3468 |
| Size | Setting depth | Packet set at | 2 per ft | jet | 3526-3530 |

| ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD | |
|---|------------------------|
| Amount and kind of material used | Depth interval treated |
| 3000 Gallon Acid 3 zones | 3275-3302-3324 |
| 2000 Gallon Acid 2 zones | 3434-3468 |
| 200 gallon 1 zone | 3526 to 3530 |

| TEST DATE: | | PRODUCTION | |
|---|---|-----------------------------|------------------------|
| Date of first production <u>05-10-82</u> | Producing method (flowing, pumping, gas lift, etc.) <u>pumping</u> | A.P.I. Gravity <u>28</u> | |
| RATE OF PRODUCTION PER 24 HOURS | Oil <u>5</u> bbls. | Gas _____ MCF | Water <u>99%</u> bbls. |
| Disposition of gas (vented, used on lease or sold) <u>vent</u> | | Producing interval _____ | |

RECEIVED
 KANSAS CORPORATION COMMISSION

** The person who can be reached by phone regarding any questions concerning this information.
 A witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.
 CONSERVATION DIVISION
 Wichita, Kansas

MAY 12 1982

Name of lowest fresh water producing stratum Sand Depth 60
 Estimated height of cement behind pipe Surface

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

| FORMATION DESCRIPTION, CONTENTS, ETC. | TOP | BOTTOM | NAME | DEPTH |
|---------------------------------------|------|--------|------|-------|
| Heeb | 3202 | | | |
| SS-KC-Top | 3250 | | | |
| KC Base | 3574 | | | |
| Cong | 3574 | | | |
| Arb | 3520 | | | |

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

A F F I D A V I T

STATE OF Kansas COUNTY OF Ellis SS,

Edward P. Leiker OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS

OATH, DEPOSES AND SAYS:

THAT HE IS _____ FOR _____

OPERATOR OF THE Leiker E LEASE, AND IS DULY AUTHORIZED TO MAKE THIS

AFFIDAVIT FOR AND ON BEHALF OF SAID OPERATOR, THAT WELL NO. 1 ON SAID LEASE HAS

BEEN COMPLETED AS OF THE 10th DAY OF May 19 82; AND THAT ALL

INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.

(S) Edward P. Leiker

SUBSCRIBED AND SWORN TO BEFORE ME THIS 10th DAY OF May 19 82



Carol Harfmann
 NOTARY PUBLIC

MY COMMISSION EXPIRES: 10-1-83