

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

API NO. 15- 171-20,470-0001 ORIGINAL

County Scott
-NE - NE - SW Sec. 30 Twp. 17S Rge. 31 XX ^E _W

Operator: License # 31251

2310' Feet from (S)N (circle one) Line of Section

Name: Wabash Energy Corporation

2310' Feet from (E)W (circle one) Line of Section

Address P.O. Box 595

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

City/State/Zip Lawrenceville, IL. 62439

Lease Name BROOKOVER #2 (OWWO) Well # 2

Purchaser: N/A

Field Name _____

Operator Contact Person: Larry Whitmer

Producing Formation None

Phone (618) 943-3365

Elevation: Ground 2955' KB 2960'

Contractor: Name: Abercrombie RTD, Inc.

Total Depth 4695' PBDT _____

License: 30684

Amount of Surface Pipe Set and Cemented at 4689' Feet

Wellsite Geologist: E.L. Whitmer, Jr.

Multiple Stage Cementing Collar Used? Yes X No _____

Designate Type of Completion

If yes, show depth set _____ Feet

xx New Well xx Re-Entry xx Workover

If Alternate II completion, cement circulated from 4689

Oil SWD SLOW Temp. Abd.

feet depth to 3784 w/ 150 sx cmt.

Gas ENHR SIGW

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

Drilling Fluid Management Plan REENTRY JTW 11-9-95
(Data must be collected from the Reserve Pit)

If Workover:

Chloride content 14,000 ppm Fluid volume 800 bbls

Operator: Wabash Energy Corporation

Dewatering method used Evaporation

Well Name: BROOKOVER #2

Location of fluid disposal if hauled offsite: _____

Comp. Date 7/29/94 Old Total Depth 4695'

Operator Name STATE CORPORATION COMMISSION

X Deepening X Re-perf. _____ Conv. to Inj/SWD

X Plug Back _____ PBDT _____

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

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

Lease Name _____ License No. _____

6-19-95 6-21-95 6-21-95

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

REENTRY Date OF _____ Date Reached TD _____ Completion Date _____

County _____ Docket No. _____

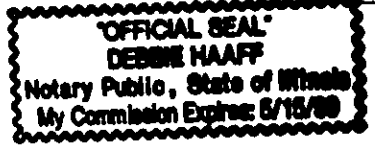
RECEIVED STATE CORPORATION COMMISSION
SEP 01 1995
09-01-95
PONDICHERRY WICHITA KANSAS

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 [Signature]
Title President Date 8/29/95
Subscribed and sworn to before me this 29th day of August, 19 95.
Notary Public [Signature]
Date Commission Expires 5/15/99

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)



Operator Name Wabash Energy Corporation Lease Name BROOKOVER (OWWO) Well # 2
 Sec. 30 Twp. 17S Rge. 31 East County Scott
 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 checked="" type="checkbox"/> No | <input type="checkbox"/> Log | Formation (Top), Depth and Datums | <input type="checkbox"/> Sample |
| Samples Sent to Geological Survey | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | Name | Top | Datum |
| Cores Taken | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| Electric Log Run (Submit Copy.) | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| List All E.Logs Run: | | | | |
| R..A Guard Log | | | | |

| 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 Cgs | 12-1/4 | 8-5/8 | 20# | 240 | 60/40 Pos | 150 | 2% Gel 3% c |
| Production | 7-7/8 | 5-1/2 | 14# | 4689 | EA-Z | 150 | 18% SAIt 5% Cal Seal |

| ADDITIONAL CEMENTING/SQUEEZE RECORD | | | | |
|---|------------------|----------------|-------------|----------------------------|
| Purpose: | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| <input type="checkbox"/> Perforate | | | | |
| <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 |
|----------------|---|---|-------|
| 4 | 4590-94 P-1 @ 4540 | 250 Gal MCA & 500 Gal 15% HCl | |
| 4 | 4415-18 P-1 @ 4300 | 250 Gal MCA | |
| 4 | 4263-66 | | |

| | | | | | |
|--|-----------|-----------|---|---------------|--|
| TUBING RECORD | | Size None | 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. Other (Specify)

Production Interval: Commingled

DEBBIE KAPPA
 State of Illinois
 Commission Expires 8/1/88

WELL DATA

FIELD _____ SEC 30 TWP. 17S RNG. 21W COUNTY SCOT STATE KO

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

MISC. DATA _____ TOTAL DEPTH _____

| | NEW USED | WEIGHT | SIZE | FROM | TO | MAXIMUM PSI ALLOWABLE |
|--------------|----------|--------|-------|------|----|-----------------------|
| CASING | | 14 | 5 1/2 | | | |
| LINER | | | | | | |
| TUBING | | | | | | |
| OPEN HOLE | | | | | | SHOTS/FT. |
| PERFORATIONS | | | | | | |
| PERFORATIONS | | | | | | |
| PERFORATIONS | | | | | | |

JOB DATA

TOOLS AND ACCESSORIES

| TYPE AND SIZE | QTY. | MAKE |
|---------------|------|------|
| FLOAT COLLAR | | |
| FLOAT SHOE | | |
| GUIDE SHOE | | |
| CENTRALIZERS | | |
| BOTTOM PLUG | | |
| TOP PLUG | | |
| HEAD | | |
| PACKER | | |
| OTHER | | |

| CALLER OUT | ON LOCATION | JOB STARTED | JOB COMPLETED |
|------------------|------------------|------------------|------------------|
| DATE <u>7-7</u> | DATE <u>7-7</u> | DATE <u>7-7</u> | DATE <u>7-7</u> |
| TIME <u>0530</u> | TIME <u>0900</u> | TIME <u>1100</u> | TIME <u>1245</u> |

PERSONNEL AND SERVICE UNITS

| NAME | UNIT NO. & TYPE | LOCATION |
|-----------------|---|---------------|
| <u>W WILSON</u> | <u>139377</u> <u>37004</u> <u>COMBS</u> | <u>11W 23</u> |
| <u>J BRAD</u> | <u>43222</u> <u>4110</u> <u>BJL</u> | <u>"</u> |
| <u>D. BRUNA</u> | <u>61512</u> <u>51252-78103</u> | <u>"</u> |

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. °API

DISPL. FLUID _____ DENSITY _____ LB/GAL. °API

PROP. TYPE _____ SIZE _____ LB.

PROP. TYPE _____ SIZE _____ LB.

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

ACID TYPE _____ GAL. _____ %

SURFACTANT TYPE _____ GAL. _____ IN

NE AGENT TYPE _____ GAL. _____ IN

FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN

GELLING AGENT TYPE _____ GAL.-LB. _____ IN

FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN

BREAKER TYPE _____ GAL.-LB. _____ IN

BLOCKING AGENT TYPE _____ GAL.-LB. _____

PERFPAC BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

DEPARTMENT STATE CORPORATION COMMISSION

DESCRIPTION OF JOB PTA

SEP 07 1995

JOB DONE THRU: TUBING PERMIT CASING ANNULUS TBG. ANN.

CUSTOMER REPRESENTATIVE X LARRY WHITNER JR

HALLIBURTON OPERATOR Wayne Wk COPIES REQUESTED 1

CEMENT DATA

| STAGE | NUMBER OF SACKS | CEMENT | BRAND | BULK SACKED | ADDITIVES | YIELD CU.FT /SK | MIXED LBS GAL. |
|-------|-----------------|-----------------|-----------------|-------------|---------------------------------|-----------------|----------------|
| | <u>170</u> | <u>4070 PCL</u> | <u>6075 570</u> | <u>B</u> | <u>670 GEL 1/4" # FIBER PLS</u> | <u>167</u> | <u>120</u> |

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL.-GAL. _____ TYPE _____

BREAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____

AVERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL.-GAL. _____ DISPL BBL.-GAL. _____

SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN. _____ CEMENT SLURRY: BBL. 50.0

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: BBL.-GAL. _____

ORDERED _____ AVAILABLE _____ USED _____ AVERAGE RATES IN BPM _____

TREATING _____ DISPL. _____ OVERALL _____ CEMENT LEFT IN PIPE _____

REASON _____

REMARKS SEE CEMENT - JOB LOG

THANK YOU

CUSTOMER: WMA
LEASE: 237705
WELL NO: 2
JOB TYPE: PTA
DATE: 7-7-95

JOB LOG HAL-2013-C

| CHART NO. | TIME | RATE (BPM) | VOLUME (BBL) (GAL) | PUMPS | PRESSURE (PSI) | DESCRIPTION OF OPERATION AND MATERIALS |
|--|------|------------|--------------------|-------|----------------|---|
| <p>CUSTOMER: <u>Unobach Energy</u> WELL NO.: <u>2</u> LEASE: <u>Braklin</u> JOB TYPE: <u>Long string</u> TICKET NO.: <u>839524</u></p> | | | | | | |
| 620 | 1200 | | | | | <p>Called out to cement 5 1/2" long string w/ 1500s SA cement 6 cent Guide shoe insert + fill up Part collar 2 baskets 2 gal clo fix for rubble flush + sand mud on loc, rig logging down DP Set up equipment discuss job + have safety meeting.</p> |
| | 2005 | | | | | <p>Rig had DP logged down + rig up to run cement</p> |
| | 2100 | | | | | <p>SYCSNG, 5 1/2" 14" Guide shoe Insert float valve w/ fill up 4642' baskets on 9 + 10' down on 56 ft, @ 2315' cement on 1-3-7-11-17-56-115</p> |
| | 2338 | | | | | <p>Drop ball to knockout AUTO fill tube CSNG TO 4689.96' TD=4695' Part collar @ 2304.36'</p> |
| | 2355 | | | | | <p>Tag TD + back up + cir</p> |
| 621 | 0015 | | | | | <p>300 Establish circulation + cir down to TD 300 couldn't move pipe up or down while circulating, decided to cement w/out rotating pipe</p> |
| | 0030 | 5 | 20/12 | | | <p>300 Back up + st. clo fix flush + mud flush</p> |
| | 0048 | | | | | <p>250 St. mix cement 1500s SA 2</p> |
| | 0056 | 5 | 35 | | | <p>80 cement mixed, shut in wash pump time</p> |
| | 0100 | 7 | | | | <p>75 RA plug + st. displ</p> |
| | 0120 | 3 | 113 | | | <p>1000 Ldg plug @ 4642' RA press, float held</p> |
| | 0140 | | | | | <p>2000 wash rack up + rk.</p> |
| | 0210 | | | | | <p>Job complete Thank you Larr</p> |
| | | | | | | <p>Semin Pump Time</p> |

ORIGINAL

RECEIVED
 STATE CORPORATION COMMISSION
 SEP 01 1995

MISSOURI
 DIVISION OF REVENUE