

ORIGINAL

SIDE ONE

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

Operator: License # 5120

Name: Range Oil Company, Inc.

Address 125 N. Market, Suite 1120

City/State/Zip Wichita, KS 67202

Purchaser: _____

Operator Contact Person: John Washburn

Phone (316) 265-6231

Contractor: Name: RED TIGER DRILLING

License: 5302

Wellsite Geologist: Tim Lauer

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWMO: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

8-27-90 9-01-90 9-02-90

Spud Date Date Reached TD Completion Date

API NO. 15- 169-20,306 -0000

County Saline, KS

SW SW SW Sec. 4 Twp. 16S Rge. 1W X East West

330 Ft. North from Southeast Corner of Section

4950 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

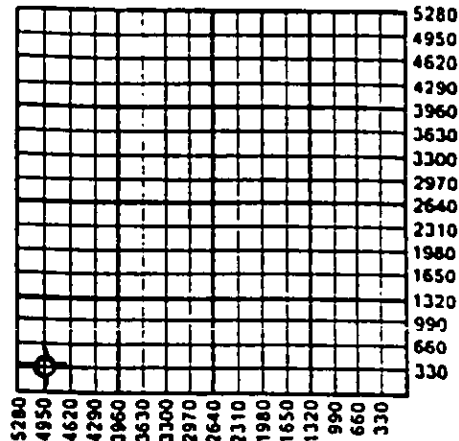
Lease Name Smith "B" Well # 1

Field Name _____

Producing Formation _____

Elevation: Ground 1279 KB 1284

Total Depth 2705' PBDT _____



Amount of Surface Pipe Set and Cemented at 211 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.

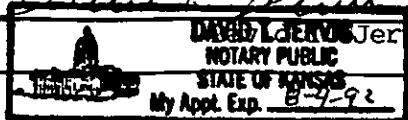
Signature John M. Washburn John M. Washburn

Title Vice President Date 9-11-90

Subscribed and sworn to before me this 11th day of September, 19 90.

Notary Public David L. Jeris

Date Commission Expires _____



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)
9-12-90
301 12 1990

SIDE TWO

Operator Name Range Oil Company, Inc. Lease Name Smith "B" Well # 1
 Sec. 4 Twp. 16 Rge. 1W East County Saline
 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 Yes No
 (Attach Additional Sheets.)
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)
 DST #1 - 2667'-2672', 30-30-30-30. Mis-run; plugged tool.
 DST #2 - 2570'-2672' 30-30-60-60. Blow; fair-weak. Rec: 123'
 mud. IFP 95-115. ISIP 640. FFP 125-135. FSIP 650.

Formation Description		
Name	Top	Bottom
Heebner		1802' (-518')
Toronto		1820' (-536')
Brown Limestone		1953' (-669')
Lansing		2014' (-730')
Base Kansas City		2338' (-1054')
Miss. Dolomite		2665' (-1381')
Miss. Dolomite Porosity		2667' (-1383')
RTD		2705' (-1421')

CASING RECORD New 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	20#	211	common	150	3%cc

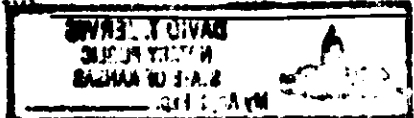
Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
			Depth

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First Production Producing Method Flowing Pumping Gas Lift 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 Perforation Dually Completed Commingled
 Other (Specify)



SERVICE TICKET

UNITED CEMENTING & ACID CO., INC.

Nº 230

BOX 712

EL DORADO, KANSAS 67042

PHONE AC 316-321-4880

DATE 9-2-86 COUNTY Lincoln **ORIGINAL**

CHG. TO: None ADDRESS _____

CITY _____ STATE _____ ZIP _____

LEASE & WELL NO. _____ SEC. _____ TWP. _____ RNG. _____

CONTRACTOR Reynolds TIME ON LOCATION 8:00 AM

KIND OF JOB _____

SERVICE CHARGE: County Unit 300.00

QUANTITY	MATERIAL USED		TYPE		
70	Saf	60-40 Postmix	@	3.85	269.50
2	Saf	Gel	@	8.00	16.00
72	BULK CHARGE	Saf	@ .75		54.00
86	BULK TRK. MILES	(3.50 x 60 x 86)			180.60
	PUMP TRK. MILES				
	PLUGS	None			- - -
	SALES TAX				43.06
	TOTAL				863.16

*T.D. _____

CSG. SET AT _____ VOLUME _____

SIZE HOLE 7 1/2"

TBG SET AT _____ VOLUME _____

MAX. PRESS. _____

SIZE PIPE _____

PLUG DEPTH _____

PKER DEPTH _____

*PLUG USED _____

TIME FINISHED 9:10 AM

REMARKS: _____

30 sq 270'
25 sq 60'
10 sq PH'

70 sq 60-40 Postmix
2 1/2 Gel

Reynolds **EQUIPMENT USED** SEP 12 1990

NAME Chet UNIT NO. _____

NAME Scott UNIT NO. _____

Reynolds
CEMENTER OR TREATER

Manufactured
OWNER'S REP.

SERVICE TICKET

UNITED CEMENTING & ACID CO., INC.

№ 168

BOX 712

EL DORADO, KANSAS 67042

PHONE AC 318-321-4880

DATE 8-27-80 COUNTY Saline ORIGINAL

CHG. TO: Royce ADDRESS _____

CITY _____ STATE _____ ZIP _____

LEASE & WELL NO. Smith B-1 SEC. _____ TWP. _____ RNG. _____

CONTRACTOR Paul Ligon, Inc. TIME ON LOCATION 3:30 PM

KIND OF JOB Count Surface Pipe

SERVICE CHARGE: 1 County Unit 306.00

QUANTITY	MATERIAL USED	TYPE	
150	Saf Class-II Cement	@ 4.65	697.50 ✓
5	Saf Chloride	@ 20.00	100.00 ✓
1-8 3/4	Baffle plate		43.20 ✓
1-8 3/4	Centralizer	@	38.00 ✓
1	Box thread lock	@	17.50 ✓
155	BULK CHARGE Saf	@ 75	116.25 ✓
65	BULK TRK. MILES (7.75 x 60 x 65)		302.25 ✓
	PUMP TRK. MILES		
1-8 3/4	PLUGS top wooden Plug	@	28.00 x
	SALES TAX		70.46
	TOTAL		1667.72

T. D. 217 CSG. SET AT 204 VOLUME 1713.1

SIZE HOLE 12 1/4 TBG SET AT _____ VOLUME _____

MAX. PRESS. _____ SIZE PIPE 8 3/4

PLUG DEPTH 200 PKER DEPTH _____

PLUG USED Wooden Rubber Plug TIME FINISHED 7:05 PM

REMARKS: Count Cr. 150 Cement Count

300 CC

1-9 1/2 Centralizer

1- Locknut

subwell

EQUIPMENT USED
 NAME Chit UNIT NO. _____ NAME Elmer UNIT NO. _____

Royce CEMENTER OR TREATER
Paul Ligon, Inc. OWNERS REP.

SEP 12 1980