

FORM MUST BE TYPED

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 # 3880
Name: K.C. RESOURCES, INC.
Address: P.O. BOX 111
City/State/Zip: CARDIFF, CA 72009
Purchaser: _____
Operator Contact Person: RCD FOVLAND
Phone (405): 834-3429
Contractor: Name: KLIMA WELL SERVICE
License: 7023

Wellsite Geologist: _____
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Reentry: Old Well Info as follows:
Operator: TEXACO INCORPORATION
Well Name: LORD #2
Comp. Date: 6-3-62 Old Total Depth: 4425
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. 8-7-98
8-4-98 8-5-98
Spud Date 8-4-98 Date Reached TD 8-5-98 Completion Date _____

API NO. 15- 095-19007-0001
County KINGMAN
C SE SE Sec. 28 Twp. 28S Rge. 7 X E W
660 Feet from S/W (circle one) Line of Section
660 Feet from E/W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name ALAMEDA Well # TR. 10-2
Field Name ALAMEDA UNIT
Producing Formation MISSISSIPPI
Elevation: Ground 1587 KB 1595
Total Depth 4425 PBD 4250
Amount of Surface Pipe Set and Cemented at 258 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.

Drilling Fluid Management Plan OWWO, 12-15-98 U.C.
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name _____
Lease Name _____ License No. _____
_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W
County _____ Docket No. _____

RECEIVED
NOV 30 1998
CONSERVATION DIVISION
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: Field Superintendent Date: 8-15-98
Subscribed and sworn to before me this 25 day of Nov. 1998.
Notary Public: [Signature]
Date Commission Expires: 1-6-2000

BJ STUCKY
NOTARY PUBLIC
STATE OF KANSAS

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 K.C. RESOURCES INC. Lease Name ALAMEDA Well # IR-10-2

Sec. 28 Twp. 28 S Rge. 7 East West
County KINGMAN

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.)

List All E.Logs Run: LOG -TECH
CEMENT BOND LOG GAMA RAY

Log Formation (Top), Depth and Datums Sample

Name MISSISSIPPI Test Date 3990 Datum -2403

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	24.0	258			
PRODUCTION		4 1/2	11.6	4425			

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used) Depth	
2	MISSISSIPPI	3988-4006		
	CEMENT BOND RAN. - TOP.	3825		

TUBING RECORD Size 2 3/8 Set At 3960 Packer At 3930 Liner Run Yes No

Date of First, Resumed Production, SMD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. <u>NONE</u>	Gas Mcf <u>50</u>	Water Bbls. <u>NONE</u>	Gas-Oil Ratio	Gravity
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Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled 3988-4006

Production Interval 3988-4006

Other (Specify) _____