

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

API NO. 15- 101-20658-001

County Lane

-SE - SW - NW Sec. 21 Twp. 17S Rge. 27 X^E_W

330 Feet from ~~SXK~~ (circle one) Line of Section

990 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 Eitel A Well # 1

Field Name LS NE

Producing Formation LKC L LKC I

Elevation: Ground 2697 KB 2704

Total Depth 4661 PBDT _____

Amount of Surface Pipe Set and Cemented at 345 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan Re-work, 9-21-00
(Data must be collected from the Reserve Pit) OR.

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. _____

Operator: License # 5144

Name: Mull Drilling Company, Inc.

Address P.O. Box 2758

City/State/Zip Wichita, KS 67201

Purchaser: Eagwing Trading

Operator Contact Person: Mark A. Shreve

Phone (316)264-6366

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

Designate Type of Completion
____ New Well ____ Re-Entry X Workover

X Oil ____ SWD ____ SLOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: Mull Drilling Company, Inc.

Well Name: Eitel A #1

Comp. Date 5-18-82 Old Total Depth 4661

____ Deepening X Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PBDT
____ Commingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Inj?) ____ Docket No. ____

6-28-00 7-1-2000
Date Date Reached TD Completion Date

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 _____

Title Mark A. Shreve, President/COO Date 7/20/00

Subscribed and sworn to before me this 20th day of July, 19X2000

Notary Public Tannis L. Tritt

Date Commission Expires March 26, 2003

TANNIS L. TRITT
Notary Public - State of Kansas
My Appt. Expires 3.26.2003

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 Mull Drilling Company, Inc. Lease Name Eitel A Well # 1

Sec. 21 Twp. 17S Rge. 27 East West
 County Lane

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Datum</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>2101</td> <td>+ 603</td> </tr> <tr> <td>Topeka</td> <td>3681</td> <td>- 977</td> </tr> <tr> <td>Heebner</td> <td>3947</td> <td>-1243</td> </tr> <tr> <td>Toronto</td> <td>3967</td> <td>-1263</td> </tr> <tr> <td>Lansing</td> <td>3986</td> <td>-1282</td> </tr> <tr> <td>Marmaton</td> <td>4321</td> <td>-1617</td> </tr> <tr> <td>Ft Scott</td> <td>4491</td> <td>-1787</td> </tr> <tr> <td>Cherokee</td> <td>4513</td> <td>-1809</td> </tr> <tr> <td>Miss</td> <td>4640</td> <td>-1936</td> </tr> <tr> <td>RTD</td> <td>4661</td> <td>-1957</td> </tr> </tbody> </table>	Name	Top	Datum	Anhydrite	2101	+ 603	Topeka	3681	- 977	Heebner	3947	-1243	Toronto	3967	-1263	Lansing	3986	-1282	Marmaton	4321	-1617	Ft Scott	4491	-1787	Cherokee	4513	-1809	Miss	4640	-1936	RTD	4661	-1957
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Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No																																		
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:
 Radiation Guard Log, Cement Bond Log

CASING RECORD <input checked="" 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"	20#	345	Cmm	20sx	3%cc, 2%gel
Production	7 7/8"	5 1/2"	14#	4660	Cmm	25 sx	2%gel, 10% salt
					50-50 Poz	125 sx	.75% CFR2

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	4566-73	- CIBP @ 4500'		
4	4562-65	- CIBP @ 4500' (8-85)			
4	4292-95	(8-85)			
4	4182-87	(6-2000)	250 gal 15% MCA, 2000gal 15%		4182-4295

TUBING RECORD		Size <u>2 3/8"</u>	Set At <u>4473</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NE
Date of First, Resumed Production, SMD or Inj. <u>7-1-2000</u>			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>35</u>	Bbls.	Gas <u>-0-</u>	Mcf	Water <u>23</u>	Bbls. Gas-Oil Ratio <u>-0-</u> Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: _____