

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

Operator: License # 5171
Name TXO Production Corporation
Address 155 N. Market
City/State/Zip Wichita, KS 67202

Purchaser N/A K.P. + L.

Operator Contact Person Cory West
Phone 316 269-7655

Contractor: License # 5418
Name Allen Drilling Company

Wellsite Geologist Doug Clark
Phone 316-269-7600

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If ONWO: old well info as follows:
Operator Kansas Oil Corporation
Well Name Hendrix #1
Comp. Date 3-2-78 Old Total Depth 5286

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable
6-26-87 6-28-87 7-16-87
Spud Date Date Reached TD Completion Date
5072
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 344 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set feet
If alternate 2 completion, cement circulated from feet depth to w/ SX cmt
Cement Company Name
Invoice #

API NO. 15-007-20,599-0001
County Barber
SE SE NW Sec. 31 Twp 33 Rge. 13 East
X West

2970 Ft North from Southeast Corner of Section
3070 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

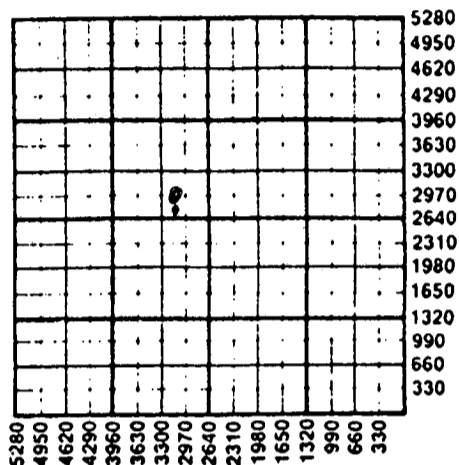
Lease Name Hendrix "B" Well # 1

Field Name Sooter

Producing Formation Mississippi

Elevation: Ground 1860 KB 1865

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #

Groundwater Ft North from Southeast Corner
(Well) Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water 4950 Ft North from Southeast Corner
4290 Ft West from Southeast Corner
Sec 31 Twp 33 Rge 13 East X West

Other (explain)
(purchased from city, R.W.D. #)

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. 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 Doug Clark
Title District Geologist Date 8/19/87

Subscribed and sworn to before me this 19th day of August 1987
Notary Public Nancy K. Lay
Date Commission Expires January 30, 1988

NANCY K. LAY
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 1/30/88

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Time Log Received
RECEIVED
STATE CORPORATION COMMISSION SWD/Rep/ NGPA
 KGS Plug Other
AUG 21 1987
08-21-87
Wichita, Kansas
Form ACO-1 (5-86)

Sec 31, Twp 33, Rge 13

Operator Name TXO Production Corporation Lease Name Hendrix "B" Well #1

Sec. 31 Twp. 33S Rge. 13 East West County Barber

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name Top Bottom

See Log Tops from old well
 Kansas Oil Corporations
 HENDRIX #1

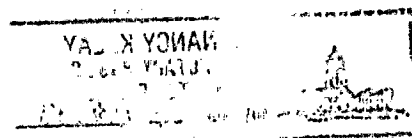
CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs/Ft.	Setting Depth	Type of Cement	#Sacks Used	Type and Percent Additives
Production	8 5/8	4 1/2	10.5	5002 344	Surefill	150	
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated					Depth	
	4810-4836 MISS			1590 HCL			
TUBING RECORD							
Size	Set At	Packer at	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No				
Date of First Production	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		
		729					

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify)
 Used on Lease Dually Completed Commingled

7-16-80



BJ-TITAN SERVICES COMPANY

CUSTOMER COPY

DATE OF JOB
MM DD YY
6 28 87

CONTRACT NO. **350021**

DIRECT CORRESPONDENCE TO: P.O. BOX 4442 HOUSTON, TX 77210	TERMS: NET 30 DAYS FROM DATE OF CONTRACT	REMIT TO: P.O. BOX 200416 HOUSTON, TX 77216
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ORDER NO.

CUSTOMER

NAME: **TXO PRODUCTION** NO. _____

ADDRESS: **155 N. MARKET**

CITY: **WICHITA** STATE: **Ks** ZIP CODE: **67202**

AUTHORIZED BY: _____

DESCRIPTION OF WELL

WELL NO.: **71-B 0000** OIL: NEW: STATE: **KANSAS** CODES: _____

LEASE NAME: _____ COUNTY/PARISH: **BARBER**

FIELD NAME: _____ CITY: _____

OWNER: **HILLEN DRUG.** MTA DISTRICT: _____

LEASE LINES: _____

SURVEY LINES: **#31 PUMP TRUCK - DONE**

SURVEY: **B-25 BULK TRUCK - LAID**

DIRECTIONS TO LOCATION: **Med Jones 310 105 5.0 1/2 E-MDB**

SECTION, TOWNSHIP, RANGE: **31 33 19W**

QUADRANT: **1/2 SECTS OF 4 1/2 10 1/2 CSB**

JOB INFORMATION

ARRIVED						ROUND TRIP-MILES					
HH	MM	A	MM	DD	YY	HH	MM	A	MM	DD	YY
4	30	P	6	28	87			P	6		
JOB CODE	TYPE OF JOB		API OR IC NO.								
106	PRODUCTION SPRING		3003 FT.								
AVG. PSI	BUSINESS CODE	INJ. RATE (BPM)	WORKING WELL DEPTH								
			3003 FT.								

DIST. NO.	DISTRICT NAME	SLSMAN NO.
3310	GREAT BEND	27

CONTRACT CONDITIONS

This contract must be signed before the job is started or merchandise delivered. The undersigned is authorized to execute this contract as an Agent of the Customer. As such, the undersigned acknowledges that this contract for services, materials, products and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional substitute terms and/or conditions shall become a part of this contract without the written consent of an Officer of BJ-TITAN SERVICES COMPANY.

SIGNED: *[Signature]* (WELL OWNER: OPERATOR, CONTRACTOR OR AGENT)

PRICE BOOK REF. NO.	SERVICES/MATERIAL	U/M	QUANTITY	PRICE	EXTENSION
01 10.100330	PRICE OF JOB	SET UP		1032 00	1032 00
02 10.100335	BELOW 3000' FOOTAGE	PER FT.	2.85	12 00	34
03 10.109005	PUMP TRUCK. MED LODGE	MILE	150	160	24 00
04 10.410504	CLASS A.	SK	150	5 00	750 00
05 10.420145	GOEL	BWT	1.41	6 75	9 52
06 10.415048	A-7	SPK	1.41	23 00	32 43
07 10.428030	GYPSEAL	SPK	8.46	13 50	114 21
08 10.428048	KCH.	LB	2856	27	77 11
09 10.425010	MUD SWEEP	GAL.	500	90	450 00
10 10.430508	4 1/2 RUBBER PILE	PILG	1	23 50	23 50
11 10.940115	HAWKING 7.6 x 16	TON/MI	121.6	68	82 69
12 10.880095	HANDLING + DUMPING	CY	150	92	138 00
13 10.433013	INSERT 4 1/2	EA	1	144 90	144 90
14 10.433050	CENTRALIZERS 4 1/2 RECEIVED	EA	5	42 30	211 50
15 10.433044	BASKET 4 1/2 STATE COM	EA	2	108 00	216 00
16 10.433018	LOCK RING 4 1/2	EA	2	14 40	28 80

SERVICE REPRESENTATIVE: *[Signature]* PR BOOK: **27**

The above material and service ordered by the Customer and received by: *[Signature]* (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

CHECK IF CONTINUATION USED. THIS IS NOT AN INVOICE. THIS CONTRACT IS SUBJECT TO REVIEW AND CORRECTION BY OUR ACCOUNTING DEPT.

CONTRACT NO. 350021

DATE OF JOB	MM DD YY 6/28/07	DISTRICT	03316	AUTHORIZED BY	
CUSTOMER	TXO PRODUCTION				

PRICE BOOK	PRICE BOOK REF. NO.	SERVICES / MATERIAL	U/M	QUANTITY	PRICE	PRICE EXTENSION
#7		TOTAL PRICE OF JOB				3314 00
<p>THANK YOU !!</p>						
<p>RECEIVED STATE CORPORATION COMMISSION AUG 21 1907</p>						

SERVICE REPRESENTATIVE <i>Stimmer</i>	PR. BOOK #7	UNSEPARABLE DIVISION THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY: <i>[Signature]</i> (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)
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CHECK IF ADDITIONAL CONTINUATION IS USED

This is not an invoice. This contract is subject to review and correction by our Accounting Department.