

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

Operator: License # 05078

Name: DONNA LEE OIL CO., INC.

Address: ROUTE 2, BOX 278

City/State/Zip: IOLA, KS 66749

Purchaser: TONDA OIL CO.

Operator Contact Person: DON THOMPSON

Phone (316) 331-8831

Contractor: Name: THORNTON DRILLING COMPANY

License: 04815

Wellsite Geologist: RICHARD GRAMLY

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD SIGW Temp. Abd.

Gas ENHR SIGW

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

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back _____ PSTD

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

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

5-26-94 5-31-94 7-7-94

Spud Date _____ Date Reached TD _____ Completion Date _____

API NO. 15- 125-29830

County MONTGOMERY

NW. NE. SE. _____ Sec. 15 Twp. 32 Rge. 15 E W

2310 Feet S (circle one) of Section Line

990 Feet E (circle one) of Section Line

Footages Calculated from Nearest Outside Section Corner:
NE. NW or SW (circle one)

Lease Name SNYDER Well # 3

Field Name JEEFERSON-SYCAMORE

Producing Formation WEIR-PITTSBURG

Elevation: Ground 800 KB _____

Total Depth 1265 PSTD 1227

Amount of Surface Pipe Set and Cemented at 21 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1228

feet depth to SURFACE w/ 170 sx cmt.

Drilling Fluid Management Plan ALT 2 2/21 8-8-95
(Data must be collected from the Reserve Pit)

Chloride content NA ppa fluid volume 120 bbls

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Richard E. Deasley

Title AGENT Date 10-6-94

Subscribed and sworn to before me this 6TH day of OCTOBER, 1994.

Notary Public Dorothy A. Thompson
DOROTHY A. THOMPSON

Date Commission Expires OCTOBER 31, 1997

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
G	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KCS	<input type="checkbox"/> Plug <input type="checkbox"/> Other
(Specify)		
RECEIVED STATE CORPORATION COMMISSION		

Form ACO-1 (7-91) OCT 10 1994
OIL & GAS CONSERVATION DIVISION
WICHITA, KANSAS

DOROTHY A. THOMPSON
NOTARY PUBLIC
STATE OF KANSAS
10-27-94

Sec. 15 Twp. 32 Rpt. 15
 East
 West

County MONTGOMERY

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 checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<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	PAWNEE	630	+ 170
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	FT SCOTT	730	+ 70
		WEIR-PITTSBURG	962	- 162
		MISSISSIPPIAN	1208	- 408

List All E.Logs Run:

DUAL COMPENSATED POROSITY LOG
 DUAL INDUCTION LOG
 CEMENT BOND

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediata, 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		7"	15	21'	PORTLAND	6	NONE
PRODUCTION	6 1/2"	4 1/2"	10.5	1228'	PORTLAND	170	2% GEL

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	962 - 966	SAND FRACTURE 15,000 SAND	962
		110 BBL. GELLED WATER	966
		7,000 C.F. NITROGEN	

TUBING RECORD	Size <u>2 3/8</u>	Set At <u>968</u>	Packer At <u>None</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWI or Inj.	<u>7-8-94</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>0</u> Bbls.	Gas <u>60</u> Mcf	Water <u>40</u> 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. Commingled Other (Specify) _____

Production Interval: 962-966

S C Z
 BOX 411
 CHERRYVALE, KS. 67335
 316-336-~~3333~~ 3817

INV 1368

DATE	JOB #	SEC	TWP	RANGE	WELL # & FARM	PLACE
6/1/94		15 10	32S	15E	Snyder #3	Le Hunt
CHARGE TO:					OWNER	COUNTY
Jet Drlg.						M &
MAILING ADDRESS					CONTRACTOR	STATE
						KS
CITY & STATE						

L.S. CEMENTING & ACID

TYPE OF JOB	CASING	PLUGS	HOLE DATA
SURFACE 20 FT '7'	NEW USED	15WP	SIZE 6 1/2
PRODUCTION 1238TD	SIZE WT.	TOP	PERFS
SQUEEZE TOP BOTTM	DEPTH	OTHER EQUIP.	MAX PRESSURE
	1227 +		SI 500*
WASH	TYPE		ADMIXES

PULLING UNIT - DRILLING & HOLE CLEAN UP - HEATER TRUCK

TYPE JOB	PULLING	WASHING	CEMENTING	POWER SWIVEL	HEATING	ROSTABOUT
JOB START 10:30						
JOB STOP 11:35			2:45 + Wash			

COMMENTS:

Wash 4 1/2 To TD
 Cement from 1227
 To Surf w/ 187 SKS

PUMP CHG	\$ 350.00
WATER - 3br x 42.00	\$ 126.00
PULLING UNIT	\$
HEATER	\$
CEMENT SACKS 167 @ 6.25	\$ 1043.75
ADMIXES	\$
EQUIPMENT - 15WP	\$ 25.00
OTHER	\$
POWER SWIVEL 3 Hel	\$ 24.00

TOTAL

\$ 1,568.75

TAX on Material

53.54

1,622.29

SCZ FOREMAN

AUTHORIZED BY & ACCEPTED RECEIVED
 STATE COMMISSION

OCT 10 1994