

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 # 30451

Name: GeoMap, Inc.

Address 2101 West Maple

City/State/Zip Independence, KS 67301

Purchaser: _____

Operator Contact Person: _____

Phone (316) 331-3140

Contractor: Name: MOKAT Drilling

License: 5831

Wellsite Geologist: Vance Cain

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

01-31-91 02-01-91 02-14-91

Spud Date Date Reached TD Completion Date

API NO. 15- 125-29,524 0000

County Montgomery

NW SE SW SW Sec. 23 Twp. 32S Rge. 15 East
495 West

_____ Ft. North from Southeast Corner of Section

4455 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

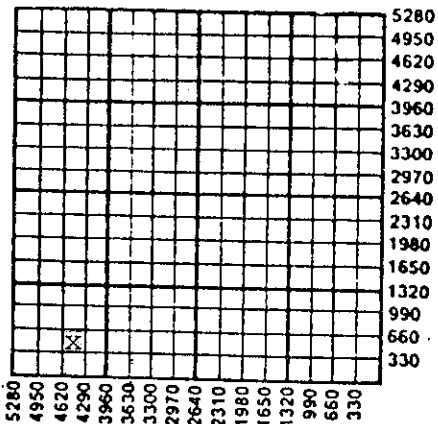
Lease Name Wint Well # G-2

Field Name Jefferson-Sycamore

Producing Formation Riverton - Coal

Elevation: Ground 830 KB _____

Total Depth 1217 PBTD 1212



2-26-91

Amount of Surface Pipe Set and Cemented at 22 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from Surface

feet depth to 1212 w/ 130 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 Terri L. Bryant-Cain

Title President Date 2/19/91

Subscribed and sworn to before me this 19th day of February, 1991.

Notary Public Jeffrey S. Parker

Date Commission Expires 11-26-1991

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)

SIDE TWO

Operator Name GeoMap, Inc. Lease Name Wint Well # G-2
 Sec. 23 ~~T. 32S~~ Rge. 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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

Formation Description

Log Sample

Name Top Bottom

See Attached

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	10.5	8.38		22	Portland	5 sx	None
Casing	6.25	4.5	9.5	1212	Portland		See Attached

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4	1177 - 1181	A/400 gal. 15% HCL Frac 30# geled wtr 10 sx 100 mesh, 120 sx 20x40	

TUBING RECORD Size 2.375" Set At 1204 Packer At _____ Liner Run Yes 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

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

METHOD OF COMPLETION Open Hole Perforation Dually Completed Commingled Other (Specify) _____

Production Interval _____

Well Name: Wint G-2
 Spot Location: NW SE SW SW
 495 FSL, 4455 FEL
 S23-T32S-R15E
 Montgomery Co.
 Contractor: MOKAT Drilling (Air Rotary)
 API No: 15-125-29,524
 Field: Jefferson - Sycamore
 SPD: 01-28-91
 DRLG COMP: 02-01-91
 RTD: 1217'

Wint G-2	01-28-91 01-31-91	SPUD, 21' surf pipe, cemented w/ 4 sx DRLG, T.D. 975' Gas test - 695' - sli blo. Gas test - 800' - 2.5 psi on .5" orifice - 53.4 MCFD, Gas test - 950' - 6.0 psi on .5" orifice - 86.3 MCFD, Gas test - 975' - 8.5 psi on .5" orifice - 105 MCFD
	02-01-91	DRLG, T.D. 1215' Gas test - 1150' - 9.25 psi on .5" orifice - 110 MCFD, Gas test - 1180' - 12 psi on .5" orifice - 129 MCFD, Gas test - 1215' - 9 psi on .5" orifice - 108 MCFD. Gel hole w/ 13 sx Fr Wtr Gel
	02-02-91	MICT, Log (DIL, CNP-CD) MIPU, Run 1212' 4.5" 10.5# csg. Centralizers @ 1176', 1062', 873' & 716'. Cmt csg w/ 137 sx Portland A, 3 sx gel, 1 sx Flo-seal, 5 sx Gilsonite
	02-08-91	MICT, Log (CBL, GRN) Perf (Rvtn Coal) 1177-1181' w/ 4 HPFT HSC. GSG
	02-09-91	MIPU, Swd dwn, A/400 gal 15% HCL, Brk dwn @ 700 psi, treated @ 1 bbl/min 1200 psi - 1 bbl/min 700 psi. Frac (10 bbl/min) 180 bbl pad, 30# gel wtr, 10 sx 100 mesh, 120 sx 20x40 .5 ppg-100 mesh-700 psi, 1.0 ppg-100 mesh- 700 psi, 1.0 ppg-100 mesh 600 psi, 2.0 ppg-100 mesh-600 psi, 3.0 ppg 20x40- 700 psi, 4.0 ppg-20x40-700 psi, 5.0 ppg-20x40-600 psi, 2 bbl overflush ISIP 700 psi, 5 min - 300 psi
	02-11-91	80 psig. Blw dwn.
	02-14-91	MIPU, Wsh Dwn, Run 1203.9' 2.375" Tbg 5' bbl, scrn, anchor, pump, etc

FEB 19 1991

Wint G-2

<u>FORMATION</u>	<u>DEPTH</u>	<u>DATUM</u>	<u>SHOWS</u>
Altamont LS	483-515	+347	
Pawnee LS	628-654	+202	
Oswego LS	730-798	+100	
Mulky Coal	798-804	+ 32	
Breezy Hill LS	804-812	+ 26	
Iron Post Coal	820-822	+ 10	
Bevier Coal	848-850	- 18	
Croweburg Coal	886-889	- 56	
Weir Coal	967-972	-137	
Bartlesville SS	1122-1162	-292	
Riverton Coal	1173-1178	-343	
Mississippi Cht	1202-1217 TD	-372	

STATION Chanute OPERATOR Harvey Prodan
CONSOLIDATED OIL WELL SERVICES, INC.

P.O. Box 884
 Chanute, Kansas 66720
 Phone (316) 431-9210

Ticket 83547

Date: <u>2-2-91</u>	Customer's Acct. No. <u>2139</u>	Sec. <u>23</u>	Twp. <u>32</u>	Range <u>15</u>	Well No. & Farm <u>#G-2</u>	WINT	Place or Destination <u>Independence</u>
Charge To <u>CAIN, VANCE</u>				Owner			County <u>W/C</u>
Mailing Address <u>1702 Overlook DR.</u>				Contractor			State <u>KS</u>
City & State <u>Independence, KS 67301</u>				Well Owner Operator Contractor			

CEMENTING SERVICE DATA

TYPE OF JOB	CASING	HOLE DATA	PLUGS AND HEAD	PRESSURE	CEMENT LEFT IN CASING
Surface	New <input checked="" type="checkbox"/>	Bore Size <u>6 1/4</u>	Bottom <u>Rubber Plug</u>	Circulating <u>200</u>	Requested
Production <input checked="" type="checkbox"/>	Used	Total Depth <u>1215</u>	Top <u>PC</u>	Minimum <u>300</u>	Necessity
Squeeze	Size <u>4 1/2</u>	Cable Tool	Head	Maximum <u>600</u>	Measured
Pumping	Weight	Rotary <u>Art</u>	FLOAT EQUIPMENT	Sacks Cement <u>13754</u>	
Other	Depth <u>1212</u>			Type & Brand <u>portland-A</u>	
	Type <u>8 1/2</u>			Admixes <u>2% sol gilsonite</u>	

FRACTURING - ACIDIZING SERVICE DATA

Type of Job	At Intervals of				
Bbls Fracturing Fluid	Breakdown Pressure from	psi to	psi		
Treating Pressures: Maximum	psi	Minimum	psi	Avg. Pump Rate	GPM/BPM
Sand	Gals. Treating Acid	Type		Open Hole Diameter	
Well Treating Through: Tubing	Casing	Annulus	Size	Weight	
Remarks:					
No. Perforations	Pay Formation Name	Depth of Job			ft

CEMENTING

INVOICE SECTION

FRACTURING - ACIDIZING

Pumping Charge <u>one cement job</u> <u>5401</u>	Office Use \$ <u>407.04</u>	Pumping Charge	Office Use \$
137 Sacks Bulk Cement @ <u>1101</u> <u>719.25</u>	12x30 Sand @	10x20 Sand @	x Sand @
Ton Mileage on Bulk Cement <u>4/5</u> @ <u>6401</u> <u>137.00</u>	Ton Mileage @	Gals., Acid @	Chemicals @
35 Premium Gel @ <u>1301</u> <u>20.70</u>	Equipment @	Potassium Chloride @	Rock Salt @
1x Flo-Seal @ <u>1302</u> <u>30.00</u>	5-sx gilsonite @ <u>1304</u> <u>85.00</u>	Water Gel @	Granulated Salt @
1-4 1/2 Plug <input checked="" type="checkbox"/> @ <u>4408</u> <u>22.50</u>	Transport Truck (Hrs.) @	Transport Truck (Hrs.) @	Vac Truck (Hrs.) @
Tax <u>46.07</u>	Total \$ <u>1687.52</u>	Total \$	

A Finance Charge computed at 1% per month (annual percentage rate of 21%) will be added to balance over 30 days.

118454

No. 11126

Company Geo MAP

Date 2-8-91

Address _____

Cust. Order No. _____

Well Wint # G-2

Field _____

County Montgomery

State K

Location 495 FSL & 4455 FEL

API # _____

NW SE SW SW Section 2 3

Township 32S

Range 15E

TYPE OF LOG	G/RAY	DRILL PERF.	NEUTRON
Run No. & Well Classification	1-NW	2-NW	1-NW
Date	2-8-91	2-8-91	2-8-91
Present Depth (Log)	1211.5	1206	1211.5
Present Depth (Driller)			
Type of Fluid in Hole	WT	WT	WT
Fluid Level	Full	Full	Full
No. of Sacks Cement			
Company			
Resistivity & Temp.			
Max. Recorded Temp.			
O. D. of Down Hole Equip.	1 1/4	1 3/4	1 1/4
Time Constant — Sec's.	4		1
Logging Speed Ft./Min.	25		25
Sensitivity:			
Bottom of Logged Interval	1205	1204	1210
Top of Logged Interval	20	10	20
Feet Recorded	1185	1194	1190

Log Meas. From GL Elev. 822

Drig. Meas. From _____ Elev. _____

Perm. Datum _____ Elev. _____

Recorded By: Dettwiler Witnessed By: Mr. Larsh

Run No.	Size, In.	Wt., Lbs.	Interval
	<u>4 1/2</u>		<u>0 To 10</u>
			To _____

BILLING

Bill To: _____

Address: _____

Company: _____

PERFORATION DATA HSC

Type and Size 3/8 over pmk

Spacing 4 pft Total Holes 17

17 Holes From 1177 To 1181

Holes From _____ To _____

Holes From _____ To _____

Holes From _____ To _____

Holes From _____ To _____

Holes From _____ To _____

PRINT DISTRIBUTION

Name _____

Address _____

Qty. 12

Name _____

Address _____

Qty. _____

Name _____

Address _____

Qty. _____

Remarks: _____

ADAMS JETWELL SERVICE, INC.

Office: 431-2120
Home: 763-2301

629 So. Santa Fe Chanute, Kansas 66720

CHARGES

GAMMA-RAY NEUTRON LOG	\$ <u>200.00</u>
BOND LOG	\$ <u>200.00</u>
MILEAGE CHARGES	
BRIDGE PLUGS " @ _____	
PORTABLE MAST	
PERFORATION <u>10</u> HOLES <u>HSC</u>	\$ <u>400.00</u>
EXTRA HOLES <u>7</u> @ <u>10⁰⁰</u>	\$ <u>70.00</u>
SHOOT OFF PIPE	
EXTRA RUNS	
EXTRA HOLES @ _____	
SET-UP CHARGE	
DEPTH CHARGE	
STANDBY TIME	
SALES TAX	

TOTALS \$ 870.00

Ck. No. _____ Discount \$ _____

Paid on Loc. _____

I certify that the services ordered have been completed and that the estimated charges, subject to correction by the invoicing department are as shown above.

By: Bill Dettwiler
ADAMS JETWELL SERVICE, INC.

TO: ADAMS JETWELL SERVICE, INC. Chanute, Kansas:
The above requested services have been performed and are hereby accepted and approved for payment in accordance with the terms and conditions of your current price schedule. If signed by an agent in behalf of the undersigned customer, said agent represents that he has full authority to sign for his principal.

Customer: _____

By: _____
Customer's Authorized Rep.