

SIDE ONE

Compt.

Two (2) copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within thirty (30) days after the completion of a well, regardless of how the well was completed.

Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on Side One will be of public record and Side Two will then be held confidential.

Applications must be made on dual completion, commingling, salt water disposal, injection and temporarily abandoned wells.

Attach one copy only wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). (Rules 82-2-105 & 82-2-125) KCC# (316) 263-3238.

LICENSE # 5503 EXPIRATION DATE 6/84

OPERATOR Triple Seven Inc. API NO. 15-073-23,070 0000

ADDRESS 6300 NW Expressway St. 100 COUNTY Greenwood

Oklahoma City, Ok. 73132 FIELD Severy

** CONTACT PERSON Billm Harvey PROD. FORMATION Kansas City KC-100

PHONE 316-745-3235

PURCHASER Eureka Crude LEASE Mast

ADDRESS 26 N. Main P.O. Box 110 WELL NO. 3

Eureka, Kansas 67045 WELL LOCATION

DRILLING CONTRACTOR A.R. Palmer Drilling Inc. 2475 Ft. from S Line and

ADDRESS Box 116 2145 Ft. from W Line of

Longton, Ks. 67352 Nwc SW(Qtr.) SEC 17 TWP 28 RGE 11E.

PLUGGING CONTRACTOR WELL PLAT (Office Use Only)

ADDRESS KCC [checked] KGS [checked] SWD/REP PLG.

TOTAL DEPTH 1255 PBTD

SPUD DATE 1-2-84 DATE COMPLETED 1-5-84

ELEV: GR DF KB

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE

Amount of surface pipe set and cemented 40.20 DV Tool Used?

THIS AFFIDAVIT APPLIES TO: (Circle ONE) Oil, Gas, Shut-in Gas, Dry, Disposal, Injection, Temporarily Abandoned, OWWO. Other

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

AFFIDAVIT

A.R. Palmer, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

A.R. Palmer (Name)

SUBSCRIBED AND SWORN TO BEFORE ME this 9th day of Jan. 19 84.

VELMA J. PALMER Notary Public Elk County

MY COMMISSION EXPIRES State of Kansas 2-87

My Appointment Expires

Velma J. Palmer (NOTARY PUBLIC)

** The person who can be reached by phone regarding any questions concerning information.

RECEIVED STATE CORPORATION COMMISSION FEB 15 1984 CONSERVATION DIVISION Wichita, Kansas

OPERATOR D B A Oil & Gas Inc. LEASE Rising "B" SEC. 16 TWP. 28 RGE. 11E

WELL NO. 3

FILL IN WELL INFORMATION AS REQUIRED:

Show all important zones of porosity and contents thereof; cased intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Check if no Drill Stem Tests Run.				
Surface	0	42		
Shale	42	49		
Lime	49	60		
Shale	60	65		
Lime	65	69		
Shale	69	74		
Lime	74	88		
Shale	88	155		
Lime	155	161		
Shale & Sand	161	174		
Lime	174	191		
Shale	191	336		
Lime	336	344		
Shale	344	356		
Lime	356	368		
Shale	368	374		
Lime	374	376		
Shale	376	420		
Lime	420	432		
Shale	432	490		
Sand	490	522		
Shale	522	629		
Lime	629	633		
Shale	633	659		
Lime	659	663		
Shale	663	734		
Lime	734	882		
Shale	882	1033		
Lime	1033	1046		
Lime & Shale	1046	1049		
Shale	1049	1067		
Lime	1067	1074		
Shale	1074	1094		
Lime	1094	1186		
Coal	1186	1188		
Lime	1188	1189		

If additional space is needed use Page 2, Side 2

Report of all strings set— surface, intermediate, production, etc. CASING RECORD (New) or (Used)

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD

Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity

Estimated Production - I.P.	Oil bbl.	Gas MCF	Water %	Gas-oil ratio	CRPB

Disposition of gas (vented, used on lease or sold) Perforations

OPERATOR

D B A Oil & Gas Inc. LEASE Rising "B" SEC. 16 TWP. 28RGE. 11E

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Show all important zones of porosity and contents thereof; cased intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Check if no Drill Stem Tests Run.				
Lime	1189	1213		
Coal	1213	1215		
Lime	1215	1255TD		

If additional space is needed use Page 2, Side 2

Report of all strings set — surface, intermediate, production, etc. CASING RECORD (New) or (Used)

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
	6 1/4"	7"		40.20		15	

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

Size	Setting depth	Pecker set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated				
Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity			
Estimated Production - I.P.	Oil bbls.	Gas MCF	Water %	Gas-oil ratio	CFPB
Disposition of gas (vented, used on lease or sold)		Perforations			

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LICENSE # _____ EXPIRATION DATE _____

OPERATOR _____ API NO. _____

ADDRESS _____ COUNTY _____

FIELD _____

** CONTACT PERSON _____ PROD. FORMATION _____
PHONE _____

PURCHASER _____ LEASE _____

ADDRESS _____ WELL NO. _____

WELL LOCATION _____

DRILLING _____ Ft. from _____ Line and

CONTRACTOR _____ Ft. from _____ Line of

ADDRESS _____ the (Qtr.) SEC TWP RGE _____

PLUGGING _____ WELL PLAT _____ (Office

CONTRACTOR _____ Use Only)

ADDRESS _____ KCC _____

KGS _____

SWD/REP _____

PLG. _____

TOTAL DEPTH _____ PBTD _____

SPUD DATE _____ DATE COMPLETED _____

ELEV: GR _____ DF _____ KB _____

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS.

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A F F I D A V I T

_____, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

SUBSCRIBED AND SWORN TO BEFORE ME this _____ day of _____ (Name)

19 _____

MY COMMISSION EXPIRES: _____ (NOTARY PUBLIC)

** The person who can be reached by phone regarding any questions concerning this information.