

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

API NO. 15- 101-20,926-0001
County Lane
-SW - SW - NE Sec. 34 Twp. 17S Rge. 23 X^EV

Operator: License # 30211

2970 Feet from SW (circle one) Line of Section

Name: Coats Energy, Inc.

2310 Feet from EW (circle one) Line of Section

Address P.O. Box 744

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

ORIGINAL

City/State/Zip Wichita, Ks 67201

Lease Name Foos Well # 1

Purchaser: NCRA

Field Name Cartmill South, Ext

Operator Contact Person: Casey Coats

Producing Formation Lansing/Kansas City

Phone (316) 262-7777

Elevation: Ground 2742 KB 2747

Contractor: Name: Fritzler Trucking, Inc

Total Depth 4635 PBTD 4260

License: _____

Amount of Surface Pipe Set and Cemented at 334 Feet

Wellsite Geologist: none

Multiple Stage Cementing Collar Used? _____ Yes X No

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

If yes, show depth set _____ Feet

X Oil ____ SVD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, USW, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ ex cmt.

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

Drilling Fluid Management Plan Re-work, 6-4-98 etc.
(Data must be collected from the Reserve Pit)

Original Operator: Alpine Drilling Co, Inc

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: Foos #1

Dewatering method used _____

Comp. Date 4/84 Old Total Depth 4635

Location of fluid disposal if hauled offsite: _____

____ Deepening X Re-perf. ____ Conv. to Inj/SVD
X Plug Back 4370 to 4260 PBTD
____ Comingled ____ Docket No. _____
____ Dual Completion ____ Docket No. _____
____ Other (SVD or Inj?) ____ Docket No. _____

Operator Name _____

Lease Name _____ License No. _____

3/9/98 3/14/98
Spud Date Date Reached TD Completion Date

____ 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 Charles Casey Coats

Title President Date 3-27-98

Subscribed and sworn to before me this 27 day of MARCH 19 98.

Notary Public Gary D. Stearns

Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C W Wireline Log Received - Copy - (Partial)
GALL. C. Geologist Report Received
133098
MAR 30 1998 Distribution
____ KGS ____ SVD/Rep ____ NGPA
____ Plug ____ Other
CONSERVATION DIVISION (Specify)
Wichita, Kansas

Operator Name Coats Energy, Inc Lease Name Foos Well # 1
 Sec. 34 Twp. 17S Rge. 28 East County Lane
 West

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 Log Formation (Top), Depth and Datum Sample

(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

| Name | Top | Datum |
|-------------|------|-------|
| Heebner | 3926 | -1179 |
| Lansing | 3964 | -1217 |
| B/KC | 4311 | -1564 |
| Marmaton | 4336 | -1539 |
| Mississippi | 4580 | -1833 |
| TD | 4635 | |

Rework of existing well

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 | 12 1/4 | 8 5/8 | 24 | 334 | Common | 225 | 2%gel, 3%CC |
| Production | 7 7/8 | 5 1/2 | 15.5 | 4630 | Common | 225 | 2%gel, 10%salt |

ADDITIONAL CEMENTING/SQUEEZE RECORD

| Purpose: | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
|---|------------------|----------------|-------------|----------------------------|
| <input checked="" type="checkbox"/> Perforate | | | | |
| <input type="checkbox"/> Protect Casing | | | | |
| <input type="checkbox"/> Plug Back TD | | | | |
| <input checked="" 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 | 4270-4273 | 1000 gal 20% acid | 4270-73 |
| | CIBP at 4260' Plug off 4270-73 | 4318-22, 4336-38 perfs | |
| 4 | 4202-4209 | 1000 gal 20% acid | 4202-05 |
| | | 500 gal 20% acid | 4202-09 |

TUBING RECORD Size 2 3/8 Set At 4081 Packer At none Liner Run Yes No

Date of First, Resumed Production, SMD or Inj. 3/14/98 Producing Method Flowing Pumping Gas Lift Other (Explain)

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----------|---------|-------------|---------------|---------|
| | 20 | tstm | 60 | | 36 |

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 4046-50(old)
4202-09(new)