

ORIGINAL

10-12-92

FORM MUST BE TYPED

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 # 6581

Name: Bison Energy Corporation

Address 9320 East Central

City/State/Zip Wichita, KS 67206

Purchaser: N/A

Operator Contact Person: C. J. Lett, III

Phone (316) 636-1801

Contractor: Name: L. D. Drilling, Inc.

License: 6039

Wellsite Geologist: Dean Pattison

Designate Type of Completion

New Well Re-Entry Workover

Oil SMD SIOW 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/SMD

Plug Back _____ PBDT

Cemented _____ Docket No. _____

Dual Completion _____ Docket No. _____

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

9-21-91 9-29-91 1-15-92
Spud Date Date Reached TD Completion Date

API NO. 15- 077-21,249-0000

County Harper

N2 - N2 - NE - Sec. 10 Twp. 31S Rge. 8 E

4950' Feet from (E)W (circle one) Line of Section

1300' Feet from (E)W (circle one) Line of Section

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

Lessee Name Muir Well # 2A-10

Field Name Spivey-Grabs

Producing Formation Mississippi

Elevation: Ground 1649' KB _____

Total Depth 4450' PBDT 4408'

Amount of Surface Pipe Set and Cemented at 221' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from N/A

feet depth to _____ w/ _____ sx cap

Drilling Fluid Management Plan ALJ 12-21-92
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dehydrating method used _____

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 _____

Title C. J. Lett, III Date 10-23-92

Subscribed and sworn to before me this 23rd day of October 19 92.

Notary Public Deana P. Eichacker

Deana P. Eichacker

Date Commission Expires September 3, 1995

DEANA P. EICHACKER
Notary Public - State of Kansas
My Appt. Expires 9-3-95

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received and Analysis
C Geologist Report Received
Distribution
 KCC SMD/Rep NSPA
 KCS Plug Other
(Specify)

SIDE TWO

Operator Name Bison Energy Corporation Lease Name Muir Well # 2A-10
 Sec. 10 Twp. 31S Rge. 8 East County Harper
 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 (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input 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	Heebner	3412	-1758
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	3647	-1993
List All E.Logs Run:		Kansas City	3892	-2238
		Stark	4052	-2398
		Hushpuckney	4082	-2428
		B-KC	4164	-2510
		Bandera	4254	-2600
		Labette	4286	-2632
		Cherokee	4297	-2643
		Miss Chert	4404	-2750

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
Surface	12 1/4	8 5/8	20	221'	POZ	150	60/40
Production	7 7/8	5 1/2	14	4449'	Class A	125	

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)	
		Amount	Depth
2	4445-49	12,400# 20/40	
2	4416-21	8,400 12/20	
		1000 BBL fluid	

TUBING RECORD	Size 2 7/8	Set At 4100	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
N/A				
Estimated Production Per 24 Hours	Oil 0 Bbls.	Gas 0 Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____

ORIGINAL

15-077-21299-0000

Open Hole Logs: ELI Logging; DIL/CNL-CDL/GR/SP/Cal. 5" from 4448' to 3300". 2" from 4448'-221'.

Hole Deviation(s): 3/4 @ 4414'

Formation Test(s): Two by Superior Testers, Great Bend, Pat Stephenson tester.

DST#1

Test Interval: 4403-4414'
Formation: Mississippian Osage
Tool Interval: 30"-60"-60"-90"
IHP: 2303#
IFP: 38-38#
ISIP: 1088#
FFP: 48-38#
FSIP: 984#
FHP: 2284#

(All pressures are field readings.)

Preflow: Very Strong off bottom of bucket immediately.

GTS: 7" Ga: 131-142 mcfd

Final Flow: Strong, gas throughout. Ga: 179-186 mcfd, stable.

Recovery: 40' Thin Mud with a good show of oil in the tool.

BHT: 114 deg.

DST#2

Test Interval: 4414-4430
Formation: Mississippi Osage
Tool Interval: 30"-60"-60"-90"
IHP: 2207#
IFP: 28-19#
ISIP: 722#
FFP: 38-38#
FSIP: 791#
FHP: 2169#

Preflow: Strong, off bottom in 30'. No GTS, blow decreasing throughout.

Final Flow: Strong, GTS: 11", Ga: 7.12-7.51 mcfd

Recovery: 70' O&GC thin Mud: 22%G, 22%O, 56%M, 10%Filtrate
60' O&GC thin Mud: 22%G, 18%O, 58%M, 12%Filtrate (48K
chlorides)

BHT: 119 deg.

DEC 21 1992
12-21-92
OPERATION DIVISION
MILWAUKEE, WISCONSIN

GEOLOGIC DATA:

Phone 913-483-2627, Russell, Kansas
 Phone 316-793-5861, Great Bend, Kans

ORIGINAL 15-077-21249-0000

Phone Plainville 913-434-2812
 Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC.

Home Office P. O. Box 31

Russell, Kansas 67665

NR 1951

New

Date	9-21-91	Sec.	10	Twp.	31	Range	8	Called Out		On Location	6:00 PM	Job Start	9:00 AM	Finish	9:00 AM
Lease	Muir	Well No.	2A-10			Location	Dugoin 1553W			County	Harper	State	KS		

Contractor	L. D. Drilling Rig #1	
Type Job	surface pipe job	
Hole Size	12 1/2	T.D. 222 ft
Csg.	8 5/8	Depth 221 ft
Tbg. Size		Depth
Drill Pipe		Depth
Tool		Depth
Cement Left in Csg.	15 ft	Shoe Joint
Press Max.		Minimum
Meas Line	206 ft	Displace 13.4 bbl
Perf.		

Owner
 To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cement and helper to assist owner or contractor to do work as listed.

Charge To *Bison Energy Corporation*
 Street *9320 E. Central*
 City *Wichita* State *K.S. 67276*
 The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No. *[Signature]*
 X *[Signature]*
 CEMENT
 Amount Ordered *(150) 2+3*
 THANK YOU \$55

EQUIPMENT

<i>M-101 Bond</i>		
Pumptrk	No. 120	Cementer <i>Mike</i> Helper <i>Duane</i>
Pumptrk	No.	Cementer Helper
Bulktrk	101	Driver <i>Heat</i>
Bulktrk		Driver

Consisting of
 Common
 Poz. Mix
 Gel.
 Chloride
 Quickset

DEPTH of Job	221 ft
Reference:	Pump Truck charge
	Mileage charge
	1 Wooden Plug
	Sub Total
	Tax
	Total

Handling	
Mileage	
	Sub Total
	Total

Remarks: *Cement Did Circulate*

Floating Equipment

Allied Cementing Co Inc
 Mike Murrel



P.O. Box 4442
Houston, Texas 77001

production

15-077-21247-0008
CEMENTING LOG STAGE NO. **ORIGINAL**

Date 9-29-91 District Midland Ticket No. DL0255
Company Bison Energy Corp Rig LD Rig 1
Lease Muir 2A-10 Well No. 2A-10
County Harper State TX
Location 10-31c-8w Field _____
2 E Mag Plant

CASING DATA: PTA Squeeze
Surface Intermediate Production Liner
Size 5 1/2 Type 7 Weight ? Collar 8 Road
Casing is used

Casing Depths: Top 3309 Bottom 4449

Drill Pipe: Size _____ Weight _____ Collars _____
Open Hole: Size 7 7/8 T.D. 4450 ft. P.B. to 4449 ft.

CAPACITY FACTORS:
Casing: Bbls/Lin. ft. 0.0244 Lin. ft./Bbl. 40.98
Open Holes: Bbls/Lin. ft. 0.0607 Lin. ft./Bbl. 16.4993
Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
Annulus: Bbls/Lin. ft. 0.0309 Lin. ft./Bbl. 32.4065
Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

Perforations: From _____ ft. to _____ ft. Amt. 1

CEMENT DATA:
Spacer Type: _____
Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG
300 BJ Mud Sweep

LEAD: Pump Time _____ hrs. Type Sure Bill
Excess _____

Amt. 125 Skys Yield 1.58 ft³/sk Density 14.44 PPG
TAIL: Pump Time _____ hrs. Type _____
Excess _____

Amt. _____ Skys Yield _____ ft³/sk Density _____ PPG
WATER: Lead _____ gals/sk Tail _____ gals/sk Total _____ Bbls.

Pump Trucks Used 1492
Bulk Equip. 6

Float Equip: Manufacturer _____
Shoe: Type Cement Depth 4449
Float: Type AFC Insert Depth 4407
Centralizers: Quantity 5 Plugs Top Rubber Btm. NO
Stage Collars _____
Special Equip. _____
Disp. Fluid Type H2O Amt. 107.5 Bbls. Weight 8.34 PPG
Mud Type _____ Weight _____ PPG

COMPANY REPRESENTATIVE Ramona J. Smith

CEMENTER Max B. Wolf

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls/Min.	
9:15	5 1/2	7 7/8				Circulate with Rig pump for 10 min
9:30			357	6	6	125 BJ Sure Bill
9:31			7	1	6	BJ Mud Sweep
9:40			35	6	6	125 BJ Sure Bill
9:40						Release plug
9:40			107.5	18	6	Pump plug
9:50						Bump Insert
						Collapse 2,630
						Best 3,110
						Plug Ret. hole with 40/60 6 1/2 Gal 15 Sk
						float did not hold



A Baker Hughes company

ORIGINAL SERVICE OPERATIONS CONTRACT CONTINUATION

15-077-21249-0000

CONTRACT NO. 060255

DATE OF JOB	MM DD YY	DISTRICT	DIST. NO.	AUTHORIZED BY
09	29	19	1	Mediana Lodge
CUSTOMER		Bigen Energy Corp		

PRICE BOOK	PRICE BOOK REF. NO.	QUANTITY	DESCRIPTION	UNIT PRICE	U/M	PRICE EXTENSION
01	110141310151210	1	5 1/2" Top Rubber Plug	63.25	E	63 25
	110141019161010W	1	5 1/2" Guide Shoe	124.00	E	124 00
	110141019161010W	1	5 1/2" GFC Insert	188.00	E	188 00
	110141019161010W	5	Centralizer	46.75	E	233 75
			Book Price			3945 64
			Discount			710 21
			Sub total			3235 43

SERVICE REPRESENTATIVE	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY
<i>Max E. Wolf</i>	<i>Ronald L. Schmitt</i>

CHECK IF CONTINUATION IS USED (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

CUSTOMER: This is not an invoice - This Service Operations Contract is subject to review and correction by our Accounting Department.



P.O. Box 4442
Houston, Tx. 772

15-077-2174-0000
ORIGINAL

SERVICE OPERATIONS CONTRACT
TERMS NET 30 DAYS FROM DATE OF CONTRACT

REMIT TO: P.O. Box 297476, Houston, Tx. 77297

DATE 9-29-91	SERVICE CONTRACT NO. 060255
NEW WELL <input checked="" type="checkbox"/> OLD WELL <input type="checkbox"/>	WELL TYPE 0
WELL NO. 2A-10	LEASE NAME & FEDERAL OFFSHORE LEASE NO. Muir
COUNTY/PARISH Harper	STATE KY
CITY Wichita	STATE Ks
WELL OWNER Bison Energy Corp	MTA CODE
STAGE NO. 1	WORKING DEPTH 44.50 FT
TOTAL PREV. GALS.	TRUCK CALLED 04:00 P
TOTAL MEAS. DEPTH	ARRIVED AT JOB 05:00 P
AVG. PSI	START OPERATION
MAX. PSI	FINISH OPERATION
MAX. BPM	TIME RELEASED
S/S EMPLOYEE NUMBER	MILES FROM STATION TO WELL 30
	SALESMAN NUMBER

CUSTOMER ACCOUNT NO.	DIST. NAME Medco/udg/bc
CUSTOMER Bison Energy Corp	DIST. NUMBER
ADDRESS P.O. Box 732317	CITY Wichita
CITY Wichita	STATE Ks
AUTHORIZED BY	ORDER NO.
STAGE NO. 1	WORKING DEPTH 44.50 FT
TOTAL PREV. GALS.	TRUCK CALLED 04:00 P
TOTAL MEAS. DEPTH	ARRIVED AT JOB 05:00 P
AVG. PSI	START OPERATION
MAX. PSI	FINISH OPERATION
MAX. BPM	TIME RELEASED
S/S EMPLOYEE NUMBER	MILES FROM STATION TO WELL 30
	SALESMAN NUMBER

SIZE HOLE 7 7/8	DEPTH 44 50 FT
SIZE & WT. DRILL PIPE OR TUBING	DEPTH FT
PACKER DEPTH	FLUID PUMPED
CUSTOMER INSTRUCTIONS FOR DISPOSAL OF RETURNED CEMENT	
REMARKS	
CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered)	

PRICE BOOK REF. NO.	QUANTITY	DESCRIPTION	UNIT PRICE	U/M	PRICE EXTENSION
1 P 4 R 2 B 2 H	400	4.50	126.00	E	50400.00
2 P 4 R 2 B 0.5	30	Pump truck Mileage	2.47	E	74.10
3 P 4 R 2 B 1	140	Class A	5.79	B	810.60
4 P 4 R 2 B 2	10	Fl 9.5	3.06	A	30.60
5 P 4 R 2 B 0.20	705	A 10 Per pound	.23	L	162.15
6 P 4 R 2 B 0.49	117	A-7 P per pound	.46	L	53.82
7 P 4 R 2 B 0.15	346	B 5 Gel	.15	L	51.90
8 P 4 R 2 B 0.10	360	BJ Mud Sweep	1.73	G	519.00
9 P 4 R 2 B 0.10	225	Drayage Per Ton Mile	.79	T	177.75
10 P 4 R 2 B 0.10	167	Mixing Charge Cubic	1.16	C	193.72

PRICE BOOK	01	SIGNED: Ronald Schussel (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)
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SERVICE REPRESENTATIVE Mark E. Wolf	THE ABOVE MATERIAL AND SERVICE ORDERED BY CUSTOMER AND RECEIVED BY Ronald Schussel (WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)
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SB4040 (REV. 4/91)

CUSTOMER: This is not an invoice - This Service Operations Contract is subject to review and correction by our Accounting Department.



LOAD SHEET ORIGINAL

15-077-21249-0000

JOB NUMBER	CONTRACT NUMBER	DATE	DISTRICT NAME			
	Medicare Lodge	9-27-91	DIRECT SHIPMENT FROM			
CUSTOMER NAME AND ADDRESS			DIRECT SHIPMENT FROM			
Bison			VENDOR NAME			
Item No.	Part Number	Description	UNIT OF MEASURE	AMOUNT LOADED	DIRECT SHIPPED	AMOUNT RETURNED
1		Front Pad				
2	410504	Class A	Q	125		
3	419029	Gyp. 1 A 10	Q	705		
4	415029	A-7-P	L	118		
5	420145	BT G. 1	L	235		
6			L			
7		Back Pad				
8	410504	Class A	Q	15		
9	415018	Fly 436	Q	10		
10	420145	BT G. 1	L	129		
11						
12						
13		On Side				
14	42510	300 BJ Med S-wrap	G	300		
15						
16						
17						
18						
19						
20						
21						
22						
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24						
25						
26						
27						

COPY 1 - DISTRICT COPY COPY 2 - CUSTOMER COPY COPY 3 - HOUSTON	LOADED BY: <u>M. C. [Signature]</u> <small>PRINTED</small>	CUSTOMER: <u>[Signature]</u> <small>SIGNATURE</small>
	_____ <small>SIGNATURE</small>	_____ <small>DATE</small>