

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

API NO. 15- 077-21293 0000

County Harper County, Kansas

SE - NE - SE - Sec. 6 Twp. 31S Rge. 5 XX^E_W

1650 Feet from S (circle one) Line of Section

330 Feet from E (circle one) Line of Section

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

Lease Name Olivier "D" Well # 3

Field Name Schrock

Producing Formation Hertha

Elevation: Ground 1329 KB 1337

Total Depth 3750' PSTD 3705

Amount of Surface Pipe Set and Cemented at 310' Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 874 8-7-96
(Data must be collected from the Reserve Pit)

Chloride content not available Fluid volume 3200 bbls

Dewatering method used haul to offsite pit

Location of fluid disposal if hauled offsite:

Operator Name Robinson Oil Company

Lease Name Drouhard License No. 5038

SW Quarter Sec. 18 Twp. 31 S Rng. 5W E/W

County Harper Docket No. _____

Operator: License # 5038

Name: Robinson Oil Company

Address 300 West Douglas, Suite 420

City/State/Zip Wichita, KS 67202

Purchaser: Texaco Trading

Operator Contact Person: Bruce M. Robinson

Phone (316) 262-6734

Contractor: Name: Duke Drilling Co., Inc.

License: 5929'

Wellsite Geologist: Ben Landes

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:

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. _____

10-04-95 10-10-95 10-10-95
Spud Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 [Signature]

Title President Date 11/16/95

Subscribed and sworn to before me this 16th day of November, 19 95.

Notary Public [Signature]

Date Commission Expires _____

CYNTHIA DBWOLF
Notary Public - State of Kansas
My Appl. Expires _____

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 RECEIVED Plug Other
KANSAS CORPORATION COMMISSION (Specify)

NOV 17 1995 ACC-1 (7-91)
11-17-1995
CONSERVATION DIVISION
WICHITA, KS

Operator Name Robinson Oil Company

Lease Name Olivier "D"

Well # 3

Sec. 6 Twp. 31 Rge. 5

East

West

County Harper County, Kansas

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 Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebener	2920 (-1581)	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Douglas	3004 (-1667)	
List All E.Logs Run: Dual Induction, CND & Sonic DST #1 3649-3664, 30-60-60-90. GTS in 18" Gauged 90,000CF decr to 30,000. Rec 490' clean GO & 120' GMD. FP75-219. SIP 1116- 1107# & bldg.		StalnakerSS	3220 (-1879)	
		KC	3488 (-2151)	
		A Zone Por.	3510 (-2173)	
		Swope Por.	3620 (-2282)	
		Hertha Por.	3658 (-2321)	
		RID	3750	

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#	310'	60/40 Poz	175	3%cc 2%gel
Production	7-7/8	5-1/2"	14#	3748'	lite fixotropic	10 125	5%caisal

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	3657-3661	750 g. DSFE 15% acid, 2 g Penn 88 & 4 g Losurf; 87.15 bbl Clayfix II flush	3657-61

TUBING RECORD		Size	Set At	Packer At	Liner Run		
		2-7/8"	3700		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumed Production, SUD or Inj.			Producing Method				
10/19/95			<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	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio
	86				12		40

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

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled 3657'-3661'

Production Interval: Other (Specify) _____

15-077-21293-00-00 ALLIED CEMENTING CO., INC.

1410

ORIGINAL

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge KS
10-5-95

DATE <i>10-4-95</i>	SEC. <i>6</i>	TWP. <i>31</i>	RANGE <i>5</i>	CALLED OUT <i>7:00</i>	ON LOCATION <i>9:30</i>	JOB START <i>12:00</i>	JOB FINISH <i>12:45</i>
LEASE		WELL # <i>D-3</i>		LOCATION <i>KUNNEY MADE 2 1/4 NE CN #2, W/SIDE</i>		COUNTY <i>HARPER</i>	STATE <i>KANSAS</i>

OLD OR NEW (Circle one)

CONTRACTOR *Duke Dalg Rig #2*
 TYPE OF JOB *SURFACE CSG*
 HOLE SIZE *12 1/4* T.D. *312*
 CASING SIZE *8 5/8 24* DEPTH *310'*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. *15'*
 PERFS.

OWNER *Robinson Oil Co.*
CEMENT

AMOUNT ORDERED *175 SH 60/40/2% GEL*
3/6 CACL₂

COMMON	<i>105</i>	@	<i>6.10</i>
POZMIX	<i>70</i>	@	<i>3.15</i>
GEL	<i>3</i>	@	<i>9.50</i>
CHLORIDE	<i>6</i>	@	<i>28.00</i>
		@	
		@	
		@	
		@	
		@	
HANDLING	<i>175</i>	@	<i>1.05</i>
MILEAGE	<i>175</i>		<i>.04</i>

TOTAL _____

EQUIPMENT

PUMP TRUCK CEMENTER *Neal Kupp*
 # *237* HELPER *Justin Hart*
 BULK TRUCK
 # *242* DRIVER *Lally Connor*
 BULK TRUCK
 # DRIVER

REMARKS:

RAN 8 5/8 TO 310' - RAN 5 BBS H₂O AHEAD
OF 175 SH 60/40/2% GEL - 3/6 CACL₂ - DESPIRED
PLUG TO 275' WITH 18.5 BBS FRESH H₂O
Cement Did Circulate

THANKS!

CHARGE TO: *Robinson Oil Co.*
 STREET _____
 CITY _____ STATE _____ ZIP _____

SERVICE

DEPTH OF JOB	<i>310</i>		
PUMP TRUCK CHARGE			<i>445.00</i>
EXTRA FOOTAGE	<i>10</i>	@	<i>.41</i> <i>4.10</i>
MILEAGE		@	<i>2.35</i>
PLUG <i>8 5/8</i> DOWN SURFACE		@	<i>45.00</i> <i>45.00</i>
		@	
		@	

TOTAL _____

FLOAT EQUIPMENT

	@	
	@	
	@	
	@	
	@	

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED
KANSAS CORPORATION COMMISSION

NOV 17 1995

CONSERVATION DIVISION
WICHITA, KS

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE *[Signature]*

ALLIED CEMENTING CO., INC.

15-077-21293-00-00 CEMENTING LOG

STAGE NO.

Date 10-4-75 District Midwest Ticket No. 1410
 Company Robinson Oil Co. Rig Duke # 2
 Lease OLUET Well No. 0-3
 County HARPER State KANSAS
 Location BUNNYO'LADE 2 1/4 1/2 - 1/2 N10 Field _____

CASING DATA: PTA Squeeze
 Surface Intermediate Production Liner
 Size 8 5/8 Type NEW Weight 24 Collar _____

Casing Depths: Top 8 5/8 310' Bottom _____

Drill Pipe: Size 4 1/2 Weight _____ Collars _____
 Open Hole: Size 12 1/4 T.D. 312 ft. P.B. to _____ ft.

CAPACITY FACTORS:

Casing: Bbls/Lin. ft. .0637 Lin. ft./Bbl. 15.70
 Open Holes: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Drill Pipe: Bbls/Lin. ft. _____ Lin. ft./Bbl. _____
 Annulus: Bbls/Lin. ft. .0735 Lin. ft./Bbl. 13.605
 Bbls/Lin. ft. _____ Lin. ft./Bbl. _____

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

CEMENT DATA:

ORIGINAL

Spacer Type: _____
 Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

5885 H²O
 LEAD: Pump Time _____ hrs. Type 60/40/2%
12L, 3/8" ACE² Excess _____

Amt. 175 Sks Yield 1.24 ft³/sk Density 14.8 PPG

TAIL: Pump Time _____ hrs. Type _____
 Excess _____

Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG

WATER: Lead 5.6 gals/sk Tail _____ gals/sk Total 23.50 Bbls.

Pump Trucks Used 237 JESSEN H
 Bulk Equip. 242 CARRY C.

Float Equip: Manufacturer _____

Shoe: Type OPEN ENDED Depth 310

Float Type 15' LIFT IN PIPE Depth 295

Centralizers: Quantity _____ Plugs Top UPDOWN Btm. _____

Stage Collars _____

Special Equip. _____

Disp. Fluid Type FRESH H₂O Amt. 135 Bbls. Weight 23 PPG

Mud Type _____ Weight _____ PPG

COMPANY REPRESENTATIVE John Armbruster

CEMENTER Neal Rupp

TIME AM/PM	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE, Bbls Min.	
12:10	200					KAN 8 5/8 CSG TO 310' BREAK CIRCULATED - KTS PUMP CIRCULATE
	150					
12:25						KTS UP TO DISCHARGE START H ₂ O
12:28	250			5.0	4	
	250			39.25	4	START SLURRY
12:38	0		44.25			SHUT DOWN - RELEASE PLUG
12:40	100				3	START DISPLACEMENT
	150			16.0	3	CEMENT TO SURFACE
	200		18.50	2.5		PLUG IN PLACE - SHUT DOWN - SHUT IN
12:45	0					RELEASE PST - JOB COMPLETE

RECEIVED
 KANSAS CORPORATION COMMISSION

NOV 17 1995

CONSERVATION DIVISION
 WICHITA, KS



CHARGE TO: **Robinson Oil Co**
 ADDRESS: **300 W. Douglas Suite 420**
 CITY, STATE, ZIP CODE: **Wichita Ks 67202**

ORIGINAL **15-077-212930-00** TICKET
 No. **835474 - 2**
 PAGE 1 OF 2

HAL 4906-N

1. SERVICE LOCATIONS FRAT KS	WELL/PROJECT NO. 3	LEASE OLIVIER 'D'	COUNTY/PARISH HARPER	STATE Ks	CITY/OFFSHORE LOCATION	DATE 10-10-95	OWNER SAME
2. TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR Duke Rig 2	RIG NAME/NO.	SHIPPED VIA 50120	DELIVERED TO WELLSITE	ORDER NO.	
3. WELL TYPE 01	WELL CATEGORY 01	JOB PURPOSE 035	WELL PERMIT NO. 15-077-212930	WELL LOCATION 6-31s-SW			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF		QTY.	U/M	QTY.	U/M	
000-117		1			MILEAGE	120	mi	2.85		342.00
001-016		1			Pump Charge	3748.71		1570.00		1570.00
314-163		1			Clay Fix It	7	gal	28.00		196.00
24	815.19251	1			Insert Float	1	EA	110.00	5/2	110.00
27	815.19313	1			Auto Fill up Assy	2	EA	69.00		138.00
26	847.6318	1			Insert valve float shoe	1	EA	350.00	5/2	350.00
40	806.60022	1			Centralizers	7	EA	60.00	5/2	420.00
350	890.10802	1			Thread locking compound	1	EA	16.75		16.75

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

DATE SIGNED **10-10-95** TIME SIGNED **1330**
 A.M. P.M.
 do do not require IPC (Instrument Protection). Not offered

SUB SURFACE SAFETY VALVE WAS:
 PULLED & RETURN PULLED RUN

TYPE LOCK	DEPTH	
BEAN SIZE	SPACERS	
TYPE OF EQUALIZING SUB.	CASING PRESSURE	
TUBING SIZE	TUBING PRESSURE	WELL DEPTH
TREE CONNECTION	TYPE VALVE	

SURVEY	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	3142.75
FROM CONTINUATION PAGE(S)	2428.86
SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE	5571.61

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) **BEN LANDES** X CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) *[Signature]* HALLIBURTON OPERATOR/ENGINEER EMP # **74220** HALLIBURTON APPROVAL *[Signature]*