

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

Operator: License # 5190 & 6390
Name Sabre Exploration & McDonald-Wallace Inc.
Address 310 W. Central 214 Petroleum Co. Inc.
City/State/Zip Wichita, Kansas 67202

Purchaser.....

Operator Contact Person Matthew Totten
Phone 264-2635

Contractor: License # 9943
Name Republic Drilling

Wellsite Geologist Ken Wallace
Phone 316-264-9444

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If OWO: old well Info as follows:
Operator.....
Well Name.....
Comp. Date.....Old Total Depth.....

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

.12/15/85.. 12/23/85..... 12/23/85.....
Spud Date Date Reached TD Completion Date
.4599.....
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 285 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to.....w/.....SX cmt
Cement Company Name.....
Invoice #.....

API NO. 15-....135-22-980-000.....
County.....Ness.....
NE. SW. NE. Sec. 28... Twp. 16S... Rge. 26... East
X West

..3630... Ft North from Southeast Corner of Section
..1650... Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

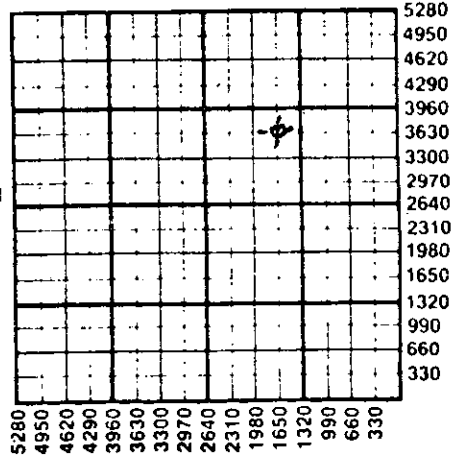
Lease Name.....Mitten.....Well #.....1.....

Field Name.....

Producing Formation.....Mississippian.....

Elevation: Ground.....2644.....KB.....2652.....

Section Plat



RECEIVED
STATE CORPORATION COMMISSION
JAN 27 1986
1-27-86
CONSERVATION DIVISION

WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket #..... Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West

Other (explain).....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. 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 *Matthew W Totten*

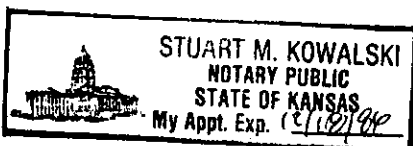
Title *Pres* Date *1/23/86*

Subscribed and sworn to before me this *23* day of *January*

19*86*
Notary Public *Stuart M Kowalski*

Date Commission Expires *12/18/88*

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Time Log Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)
[Signature]



SIDE TWO

Operator Name Sabre Exploration/McDonald-Wallace Lease Name Mitten Well # 1

Sec. 28 Twp. 16S Rge. 26 East West County Ness

WELL LOG

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation Description <input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample
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	Name	Top	Bottom
DST #1 (4120-4158), 45/45/60/45 Rec. 65' drilling mud FP's 57-57/76-76, SIP's 1286#/1229#	Anhydrite	2059 (+593)	
	Heebner	3933 (-1281)	
	Lansing	3975 (-1323)	
	B/KC	4280 (-1629)	
	Fort Scott	4477 (-1825)	
	Miss.	4578 (-1926)	
DST #2 (4549-4592) 30/30/30/30 Rec. 60' Oil Specked Mud FP's 31-31/31-31, SIP's 466#/259#			
DST #3 (4549-4599) 30/30/30/30 Rec. 1180' Mud, 120' Oil specked Mud FP's 31-103/570-590, SIP's 1008#/1070#			
DST #4 (4548-4599) 30/30/30/30 Rec. 65' Oil Specked Mud FP's 31-31/31-31, SIP's 904#/800#			

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#	285'	60/40poz	175	2%gel 3%cc
PERFORATION RECORD Shots Per Foot Specify Footage of Each Interval Perforated				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			
TUBING RECORD Size Set At Packer at				Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> 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	Gas	Water	Gas-Oil Ratio	Gravity		
	Bbls	MCF	Bbls	CFPB			

METHOD OF COMPLETION Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify)
 Used on Lease Dually Completed
 Commingled

