

FORM MUST BE TYPED

SIDE ONE

077-21280 -0000

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

ORIGINAL

API NO. 15- _____

County Harper

SW - NW - NE. Sec. 8 Twp. 32S Rge. 9 X E

Operator: License # 5429

Name: Bryce F. Hayes Oil & Gas

Address P. O. Box 108

City/State/Zip Attica, KS 67009-0108

Purchaser: N/A

Operator Contact Person: Bryce F. Hayes

Phone (316) 254-7204

Contractor: Name: Eagle Drilling Inc.

License: 5380

Wellsite Geologist: John Hastings

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD 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/SWD
 Plug Back PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

4-6-1994 4-13-1994 Plugged 4-14-94
Spud Date Date Reached TD Completion Date

990' Feet from S/W (circle one) Line of Section

2310' Feet from E/W (circle one) Line of Section

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

Lease Name Kircher Well # 4

Field Name Sharon

Producing Formation Mississippi

Elevation: Ground 1500' KB 1513'

Total Depth 4455' PBDT Same

Amount of Surface Pipe Set and Cemented at 281' Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan D&A JH 9-15-94
(Data must be collected from the Reserve Pit)

Chloride content 2500 ppm Fluid volume _____ bbls

Dewatering method used Siphoned off as settled out

Location of fluid disposal if hauled offsite: _____

Operator Name Bryce F. Hayes Oil & Gas

Lease Name Stone C-2 SWD License No. 5429

SW Quarter Sec. 12 Twp. 32 S Rng. 10W E/W

County Barber Docket No. D-24948

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 Bryce F. Hayes

Title Owner Date 9-13-94

Subscribed and sworn to before me this 13 day of September, 1994.

Notary Public Carol F. Hayes

Date Commission Expires 1-15-98

CAROL F. HAYES
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. Jan. 15, 1998

RECEIVED
KANSAS CORPORATION COMMISSION
SEP 15 1994
K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NEPA
 KGS Plug Other
(Specify)

Operator Name Bryce F. Hayes Oil & Gas Lease Name Kircher Well # 4

Sec. 8 Twp. 32S Rge. 9 East West County Harper

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 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	Heebner	3404	-1891
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	3622	-2109
List All E.Logs Run:		Kansas City	3890	-2377
		Stark Shale	4064	-2551
		Base K.C.	4156	-2643
		Cherokee Shale	4294	-2781
		Missi. Chert	4340	-2827
		Base Missi. Chert	4434	-2921

COMPENSATED DENSITY
DUAL INDUCTION
COMPUTER INTERPRETED

CASING RECORD <input checked="" 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"	24#	281'	60/40 poz	175sx	3% cach 2 2% g e t
P&A Plugging record attached							

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	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 <u>N/A</u> Bbls.	Gas <u>N/A</u> Mcf	Water <u>N/A</u> Bbls.	Gas-Oil Ratio
				Gravity

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