

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

Operator: License # 5290

Name: HINKLE OIL COMPANY

Address 150 N. MAIN, STE. 1016

City/State/Zip WICHITA, KS 67202

Purchaser: NCRA ---- KGS

Operator Contact Person: ORVIE HOWELL

Phone (316) 267-0231

Contractor: Name: STERLING DRILLING

License: 5142

Wellsite Geologist: ORVIE HOWELL 10-28-99

Designate Type of Completion
 New Well Re-Entry Workover

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

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

Operator: SAME

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SVD
 Plug Back _____ PBTB
 Commingled. Docket No. CO 2002
 Dual Completion. Docket No. _____
 Other (SVD or Inj?) Docket No. _____

3-10-97 3-21-97 10-1-99
Spud Date Date Reached TD Completion Date

API NO. 15- 007,22534-0001
County BARBER **ORIGINAL**
100' WEST OF _____
N/2-NE-SW- Sec. 6 Twp. 30S Rge. 13 XX W
2310 Feet from S (circle one) Line of Section
1880 Feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or S (circle one)
Lease Name SMITH Well # 1
Field Name LARRISON EXTENSION
Producing Formation SIMPSON & VIOLA
Elevation: Ground 1860 KB 1878
Total Depth 4698 PBTB 4650
Amount of Surface Pipe Set and Cemented at 1018 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 cmt.
Drilling Fluid Management Plan CMSD 2-4-00 JK
(Data must be collected from the Reserve Pit)
Chloride content 7600 ppm Fluid volume 350 bbls
Dewatering method used HAULED OFF FREE FLUID
Location of fluid disposal if hauled offsite: _____
Operator Name F. G. HOLL
Lessee Name KENNEDY License No. 5056
Quarter Sec. 30 Twp. 29S Rng. 12 X W
County BARBER Docket No. D22,132

RECEIVED
STATE CORPORATION COMMISSION
WICHITA, KANSAS
OCT 28 1999

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 Orvie Howell

Title GENERAL MANAGER/GEOLOGIST Date 10/28/99

Subscribed and sworn to before me this 19 day of OCTOBER 19 99.

Notary Public Melanie Frieden

Date Commission Expires FEBRUARY 10, 2000



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SVD/Rep NGPA
 KGS Plug Other (Specify)

ORIGINAL

Operator Name HINKLE OIL COMPANY

Lease Name SMITH

Well # 1

Sec. 6 Twp. 30S Rge. 13

East

County BARBER

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
(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:

DIL, CDL, CNL - FILED WITH ORIGINAL ACO-1

Log Formation (Top), Depth and Datum Sample

Name	Top	Datum
LANSING	3944	
MISSISSIPPIAN	4419	
VIOLA	4476	
SIMPSON	4582	
ARBUCKLE	4671	

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
CONDUCTOR	13 3/8	10 3/4	32.75	309	60-40 POX	240	2% GEL, 3% CaCl
SURFACE	12 1/4	8 5/8	24.0	1018	COMMON	150	2% GEL, 3% CaCl
PRODUCTION	7 7/8	5 1/2	15.5	4687	ASC	100	KOL SEAL

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	4602-04	SQUEEZED WITH 100 SACKS	
4	4602-04 - RE-PERF	250 GAL. 10% MCA	
4	4488-4504	750 GAL. MCA + 2500 GAL. GELLED 20% NEA	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 7/8"	4624		

Date of First, Resumed Production, SWD or Inj.	Producing Method
10-1-99	<input checked="" 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	Gravity
	20	120	14	6000:1	34°

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

4602-04
4488-4504