

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

ORIGINAL

Operator: License # 06230
Name: First National Oil, Inc.
Address 23 E. 11th
City/State/Zip Liberal, Kansas 67901
Purchaser: Panhandle Trading
Operator Contact Person: Bill Carlisle
Phone (316) 624-1664 619-697-9595
Contractor: Name: Patrick Well Service
License: 07547
Wellsite Geologist: None

Designate Type of Completion
 New Well Re-Entry
 Oil SVD SIGW Temp. Gas ENHR SIGW Dry Other (Core, MSW, Expl., Cathodic, etc)

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

Operator: Dolomite Resources
Well Name: Keefer Trust
Comp. Date 9-15-86 Old Total Depth 6020'
 KNOCKED OUT OLD BRIDGE PLUG AND STIMULATED OLD PERFORATIONS
 Deepening Re-perf. Conv. to Inj/SVD
 Plug Back PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SVD or Inj?) Docket No. _____

8-3-92 8-10-92
Date OF REENTRY Date Reached TD Completion Date

API NO. 15- 15-175-20,9120001
County Seward
SE-SE Sec. 2 Twp. 34S Rge. 31 X W
660 Feet from (E)W (circle one) Line of Section
510 Feet from (E)W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)
Lease Name Keefer Trust "DWWO" Well # 1-2
Field Name Kismet South Extension
Producing Formation MORROW
Elevation: Ground 2714' KB 2723'
Total Depth 6020' PSTD 5843'
Amount of Surface Pipe Set and Cemented at _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
Alternate II completion, cement circulated from _____ feet depth to _____ w/ _____ ex cat.

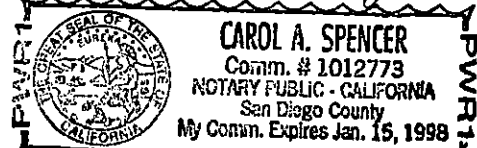
Brilling Fluid Management Plan REENTRY 11-19-92
(Date must be collected from the Reserve Pit) NA AH, L
Chloride content _____ ppm Fluid volume _____ bbls
Desulfuring method used _____
Location of fluid disposal if hauled offsite: ATED OLD PERFORATIONS
Operator Name _____
Lease Name _____ License No. _____
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 _____ Date 10/1/92
Subscribed and sworn to before me this 22 day of FEB. 19 94.
Notary Public Carol A. Spencer
Date Commission Expires Jan 15, 1998

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)



Operator Name First National Oil Lease Name Keefer Trust Well # 1-2

Sec. 2 Twp. 34S Rge. 31 East West County Seward

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 NA
 Cores Taken Yes No NA
 Electric Log Run Yes No
 (Submit Copy.)
 List All E.Logs Run:
None

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

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
		8 5/8"	24 #	1605'	Premium Lite Class C	125 500	2% CaCl ₂
		4 1/2"		5945'	50/50 Poz	240	2% gel ac ² HALAD-222

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 checked="" type="checkbox"/> Plug Off Zone	5091'-5101'	Class "H"	150	38 lbs Floccle

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
	2	5666-75'		500 gal 15% HCL	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		2 3/8"		5639'				
Date of First Resumed Production, SMD or Inj.			Producing Method					
8-12-92			<input checked="" type="checkbox"/> Flowing <input 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
				1435				

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-1B.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: 5666' - 5675'

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

COPY

Operator: License # 06230
Name: First National Oil, Inc.
Address 23 E. 11th
City/State/Zip Liberal, Kansas 67901
Purchaser: Panhandle Trading
Operator Contact Person: Bill Carlisle
Phone (316) 624-1664 619-697-9595
Contractor: Name: Patrick Well Service
License: 07547
Wellsite Geologist: None

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIGW Temp. Other (Core, WBM, Expl., Cased, etc.)
 Gas ENHR SIGW
 Dry Other (Core, WBM, Expl., Cased, etc.)

If Workover/Re-Entry: old well info as follows:
Operator: Dolomite Resources
Well Name: Keefer Trust
Comp. Date 9-15-86 Old Total Depth 6020'
 Knocked out old bridge plug and stimulated
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PSTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
8-3-92 Date of REENTRY 8-10-92 Date Reached TD Completion Date

API NO. 15- 175-20,9120001
County Seward
SE-SE Sec. 2 Twp. 34S Rge. 31 X M
660 Feet from (circle one) Line of Section
510 Feet from (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, (circle one) NW or SW (circle one)
Lease Name Keefer Trust "DWWO" Well # 1-2
Field Name Kismet South Extension
Producing Formation Morrow
Elevation: Ground 2714' KB 2723'
Total Depth 6020' PSTD 5843'
Amount of Surface Pipe Set and Cemented at _____ Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____ w/ _____ sz ext.

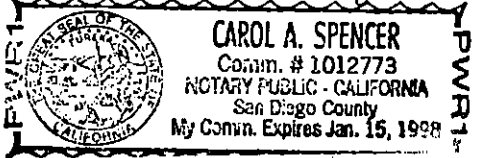
RECEIVED STATE CORPORATION COMMISSION FEB 2 5 1994
Drilling Fluid Management Plan REENTRY 11-19-96
(Plans must be collected from the Reserve Pit)
Dilution content _____ ppm Fluid volume _____ bbls
Desulfuring method used _____
Location of fluid disposal if hauled offsite: OLD PERFORATIONS
Operator Name _____
Lease Name _____ License No. _____
Quarter _____ Sec. _____ Twp. _____ Rge. _____ E/W
County _____ Docket No. _____

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



Operator Name First National Oil Lease Name Keefe Trust Well # 1-2

Sec. 2 Top. 34S Eqs. 31 East County Seward 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 NA
 Cores Taken Yes No NA
 Electric Log Run Yes No
 (Submit Copy.)
 List All E-Logs Run: None

Log Formation (Top), Depth and Datum Sample
 Name Top Datum

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	# Bags Used	Type and Percent Additives
		8 5/8"	24*	1605'	Premium Lite Class C	125 500	2% CaCl ₂
		4 1/2"		5945'	50/50 Poz	240	2% gel 0.6% HALAD 822

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Bags Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input checked="" type="checkbox"/> Plug Off Zone	5091' - 5101'	Class "H"	150	Flocele 38 lbs

Shots Per Foot	PERFORATION RECORD - Bridge Plug Set/Type	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
2	5666-75'	500 gal. 15% HCL	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8"		5639'	
Date of First, Resumed Production, SUD or Inj.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
8-12-92				
Estimated Production Per 24 Hours	Oil	Shls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity
			1435	

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: 5666' - 5675'