

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

Operator: License # 5278
Name: ENRON OIL & GAS COMPANY
Address 20 N. Broadway, Suite 830
Oklahoma City, OK 73102
City/State/Zip _____

Purchaser: _____
Operator Contact Person: Roy Porter
Phone (405) 239-7800

Contractor: Name: ALLEN DRILLING COMPANY
License: 5418
Wellsite Geologist: Glen Brown

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SLOW 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 PSTD
 Coningled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

12/01/94 12/14/94 D&A 12/15/94
Spud Date Date Reached TD Completion Date

API NO. 15- 119-20,939-0000
County Meade
SW SW NW Sec. 26 Twp. 31 Rge. 29 ^E
2310 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, SE, NW or SW (circle one)
Lease Name COLLINGWOOD, TRUST Well # 26-1
Field Name _____
Producing Formation _____
Elevation: Ground 2689' KB 2699'
Total Depth 5700 PSTD _____
Amount of Surface Pipe Set and Cemented at 1625' 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 cnt.
Drilling Fluid Management Plan DJA 3-1-96 JK
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name _____ MAR 11 1997
Lease Name _____ License No. _____
_____ Quarter Sec. _____ Twp. _____ S Rng. _____
County _____ Docket No. _____

RELEASED

FROM CONFIDENTIAL

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 Jerry Foster
Title Sr. Engr. Sec. Date 1-9-95
Subscribed and sworn to before me this 9th day of January
19 95
Notary Public Cindy R. Warren
Date Commission Expires 2/10/98

STATE CORPORATION COMMISSION
RECEIVED
K.C.C. OFFICE USE ONLY
Letter of Confidentiality Attached
Wireline Log Received
Geologist Report Received
DISTRIBUTION
KCC _____ SWD/Rep _____ NEPA _____
KGS _____ Plug _____ Other _____
(Specify)

Operator Name ENRON OIL & GAS COMPANY Lease Name COLLINGWOOD TRUST Well # 26-1

Sec. 26 Twp. 31 Rge. 29 East West County Meade

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: Dual Induction - SFL,
Compensated Neutron - Litho Density,
Microlog

Name	Top	Datum
Miss. St. Gen	5650	
Chester	5470	
Ft. Scott	5210	
Pawnee	5170	
Lansing	4500	
Heebner	4380	
Penn	3640	
Chase	2685	

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#	1625'	65/35 poz common	475 150	6% gel 3% cc 2% gel 3% cc 1/4# flo

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(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, 'SMD or Inj.' D & A Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bble.	Gas Mcf	Water Bble.	Gas-Oil Ratio	Gravity

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 _____

ALLIED CEMENTING CO., INC.

CONFIDENTIAL

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

SERVICE POINT: Medicine Lodge

ORIGINAL

DATE <u>12-3-94</u>	SEC <u>26</u>	TWP <u>31</u>	RANGE <u>29</u>	CALLED OUT <u>7:30 P.M.</u>	ON LOCATION <u>11:00 P.M.</u>	JOB START <u>12:01 P.M.</u>	JOB FINISH <u>1:00 P.M.</u>
LEASE <u>Callingsworth</u>	WELL # <u>26-1</u>	LOCATION <u>Muskrat 2 Blocks N of Elanston - 3/4 N</u>			COUNTY <u>Wheeler</u>	STATE <u>KS</u>	

OLD OR NEW (Circle one)

CONTRACTOR Allen Drilling

TYPE OF JOB Deep Surface

HOLE SIZE 12 1/4" T.D. 1630'

CASING SIZE 3 3/8" DEPTH 1612'

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX 850[#] MINIMUM 100[#]

MEAS. LINE 6" SHOE JOINT 12'

CEMENT LEFT IN CSG. 45'

PERFS. _____

OWNER Parson Oil & Gas

CEMENT Lite

AMOUNT ORDERED 1475 Ska 65/35 679d

3 9/16" - 2" Flo Seal / 5K

150 Ska 65/35 290cc 290gal

COMMON	<u>1.50</u>	@	<u>6.85</u>	<u>1027.50</u>
POZMIX		@		
GEL	<u>3</u>	@	<u>9.00</u>	<u>27.00</u>
CHLORIDE	<u>1.7</u>	@	<u>25.00</u>	<u>425.00</u>
<u>Lite</u>	<u>475</u>	@	<u>6.20</u>	<u>2945.00</u>
<u>Flo Seal</u>	<u>119 #</u>	@	<u>1.10</u>	<u>130.90</u>
		@		
		@		
HANDLING	<u>625</u>	@	<u>1.00</u>	<u>625.00</u>
MILEAGE	<u>45</u>	@		<u>1125.00</u>

EQUIPMENT

PUMP TRUCK CEMENTER Mike

233-234 HELPER Mark

BULK TRUCK

199 DRIVER Bill

BULK TRUCK

256-251 DRIVER John

MAR 11 1997 TOTAL \$ 6305.40

FROM CONFIDENTIAL SERVICE

REMARKS:

Refer to job log Cement did circulate
float held

DEPTH OF JOB	<u>1612'</u>		
PUMP TRUCK CHARGE		@	<u>920.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>45</u>	@	<u>2.25</u> <u>101.25</u>
PLUG	<u>Rubber</u>	@	<u>83.00</u> <u>83.00</u>
		@	
		@	

TOTAL # 1164.25

CHARGE TO: Allen Drilling

STREET PO Box 1389

CITY Great Bend STATE Ks ZIP 67530

FLOAT EQUIPMENT

<u>1- 8 1/2" Baker Insect</u>	@	<u>258.00</u>	<u>258.00</u>
<u>2- 8 1/2" Centrifugal</u>	@	<u>61.00</u>	<u>122.00</u>
<u>1- 8 1/2" Basket</u>	@	<u>180.00</u>	<u>180.00</u>
	@		
	@		

TOTAL # 560.00

Thank You
Allied Cementing
Mike, Mark, Bill, John

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 Richard Newman

TAX 0

TOTAL CHARGE # 8029.65

DISCOUNT # 1605.93 IF PAID IN 30 DAYS

Bid