

TYPE

AFFIDAVIT OF COMPLETION FORM

ACO-1 WELL HISTORY

Compt. _____

SIDE ONE

Two (2) copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within thirty (30) days after the completion of a well, regardless of how the well was completed.

F Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on Side One will be of public record and Side Two will then be held confidential.

Applications must be made on dual completion, commingling, salt water disposal, injection and temporarily abandoned wells.

C Attach one copy only wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). (Rules 82-2-105 & 82-2-125) KCC# (316) 263-3238. No Log

LICENSE # 8308 EXPIRATION DATE 6-30-83

OPERATOR RAYAM Corp. API NO. 15-175-20,686 00-00

ADDRESS P.O. Box 1869 COUNTY Seward

Liberal, KS 67901 FIELD

** CONTACT PERSON R.F. Burke PROD. FORMATION Mississippi
PHONE 316-624-8141

PURCHASER N/A LEASE Rolling Hills

ADDRESS WELL NO. 1

WELL LOCATION SW/SW/NW

DRILLING Damac Drilling 2110' Ft. from North Line and

CONTRACTOR ADDRESS Box 1164 330' Ft. from West Line of

Great Bend, KS 67530 the NW (Qtr.) SEC 15 TWP 34S RGE 32W (W).

PLUGGING Dowell WELL PLAT (Office Use Only)

CONTRACTOR ADDRESS Box 887

Ulysses, KS 67880

TOTAL DEPTH 6500' PBDT 6388'

SPUD DATE 4/17/83 DATE COMPLETED 5/2/83

ELEV: GR 2766.5 DF 2774 KB 2776.5

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS.

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE

Amount of surface pipe set and cemented 1611.24' DV Tool Used? No

THIS AFFIDAVIT APPLIES TO: (Circle ONE) - Oil, Gas, Shut-in Gas, Dry, Disposal, Injection, (Temporarily Abandoned), OWWO. Other

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED STATE CORPORATION COMMISSION AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

RECEIVED

MAY 10 1983

CONSERVATION DIVISION
Wichita, Kansas

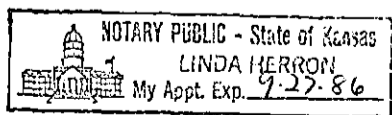
A F F I D A V I T

R.F. Burke, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

R.F. Burke
(Name)

SUBSCRIBED AND SWORN TO BEFORE ME this 3rd day of May, 19 83.



MY COMMISSION EXPIRES:

Linda Herron
(NOTARY PUBLIC)

** The person who can be reached by phone regarding any questions concerning this information.

FILL IN WELL INFORMATION AS REQUIRED: WELL NO. _____

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

| FORMATION DESCRIPTION, CONTENTS, ETC. | TOP | BOTTOM | NAME | DEPTH |
|---------------------------------------|---------|--------|------|-------|
| XX Check if no Drill Stem Tests Run. | | | | |
| Red bed & sand | Surface | 1592 | | |
| Red bed & shale | 1592 | 2415 | | |
| Shale & lime | 2415 | 6400 | | |

If additional space is needed use Page 2, Side 2

Report of all strings set— surface, intermediate, production, etc. CASING RECORD (New) or (Used)

| Purpose of string | Size hole drilled | Size casing set (in O.D.) | Weight lbs/ft. | Setting depth | Type cement | Sacks | Type and percent additives |
|-------------------|-------------------|---------------------------|----------------|---------------|-------------|--------|-----------------------------|
| Surface | | 8-5/8" | 24# | 1590' | 35/65 POZ | 650sx | 6% gel 2% cc, 1/4# flake |
| | | | | | Class H | 200 sx | 2% cc |

LINER RECORD

PERFORATION RECORD

| Top, ft. | Bottom, ft. | Sacks cement | Shots per ft. | Size & type | Depth interval |
|----------|-------------|--------------|---------------|-------------|----------------|
| | | | | | |

TUBING RECORD

| Size | Setting depth | Packer set at |
|------|---------------|---------------|
| | | |

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

| Amount and kind of material used | Depth interval treated |
|----------------------------------|------------------------|
| | |

| | | |
|--------------------------|---|---------|
| Date of first production | Producing method (flowing, pumping, gas lift, etc.) | Gravity |
|--------------------------|---|---------|

| | | | | | |
|----------------------------|-----------|---------|---------|---------------------|------|
| Estimated Production -I.P. | Oil bbls. | Gas MCF | Water % | Gas-oil ratio bbls. | CFPB |
|----------------------------|-----------|---------|---------|---------------------|------|

| | |
|--|--------------|
| Disposition of gas (vented, used on lease or sold) | Perforations |
|--|--------------|