

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

API NO. 15- 119-20815-0001 **ORIGINAL**
County Meade
100' N of NE/4 SW/4 - Sec. 6 Twp. 34S Rge. 27 xx W

Operator: License # 31723

Name: RMS Oil & Gas

Address P.O. Box 51326

Amarillo

City/State/Zip Texas 79159

Purchaser: WESTERN RESOURCES

Operator Contact Person: Rodney Shank

Phone (806) 371-4761 359-9516

Contractor: Name: H-40 Drilling

License: 30692

Wellsite Geologist: None

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD S10W Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workovers:

Operator: Charter Production Co.

Well Name: Davis #1-6

Comp. Date 9-4-90 Old Total Depth 6035

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

8-11-95 8-12-95 8-25-95
Date of REENTRY Date Reached TD Completion Date

3730 Feet from N (circle one) Line of Section
1650 Feet from W (circle one) Line of Section

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

Lease Name Davis "OWWO" Well # 1-6

Field Name Wildcat

Producing Formation Chester

Elevation: Ground 2384 KB 2397

Total Depth 6087 PBTB 6010

Amount of Surface Pipe Set and Cemented at N/A 603 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 REENTRY 9/1 9-3-97
(Data must be collected from the Reserve Pit)

Chloride content 4800 ppm Fluid volume 100 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite:

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____

County _____ Docket No. _____

RECEIVED
KANSAS CORPORATION
9-7-96

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 Rodney Shank

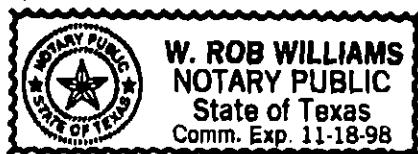
Title Owner Date 3-5-96

Subscribed and sworn to before me this 5 day of March, 19 96.

Notary Public W. Rob Williams

Date Commission Expires _____

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/> Letter of Confidentiality Attached	
C	<input type="checkbox"/> Wireline Log Received	
C	<input type="checkbox"/> Geologist Report Received	
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug
		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other (Specify)



SIDE TWO

Operator Name IRMS Oil & Gas Lease Name Davis Well # 1-6
 Sec. 6 Twp. 34S Rge. 27 County Meade
 East 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:
 Cement Bond Log

Log Sample
 Formation (Top), Depth and Datum
 Name Top Datum
 Old Well Rotary Total Depth 6035'
 Lime 6087'
 Rotary Total Depth 6087'

CASING RECORD <input type="checkbox"/> New <input checked="" 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
Production	7-7/8	4-1/2	10.5	6085'	Class H	100	3% CaCl ₂
		8 5/8"		603'			

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	5964-5980
		24000 gal 15% Acid Frac	5980

TUBING RECORD		Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-3/8	5962	N/A	
Date of First, Resumed Production, SMD or Inj.			Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
10-19-95			<input checked="" type="checkbox"/>		
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water Bbls. Gas-Oil Ratio Gravity
	0		100		

Disposition of Gas: METHOD OF COMPLETION Production Interval
 Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 5964-5980
 (If vented, submit ACO-18.) Other (Specify) _____