

SIDE ONE

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

Operator: License # 3711

Name: Shepler & Thomas, Inc.

Address P.O. Box 1162

City/State/Zip Liberal, KS 67905-1162

Purchaser: Petro-Source

Operator Contact Person: R. F. Burke

Phone (316) 624-0750

Contractor: Name: Exeter Drilling

License: _____

Wellsite Geologist: Don Huber

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD Temp. Abd.
 Gas Inj Delayed Comp
 Dry Other (Core, Water Supply, etc.)

If OWO: old well info as follows:
Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable

1-20-89 1-29-89 5-30-90
Spud Date Date Reached TD Completion Date

API NO. 15- 175-21076-0000

County Seward

C SW NW Sec. 29 Twp. 32S Rge. 31 X East West

3300 Ft. North from Southeast Corner of Section

4620 4120 Ft. West from Southeast Corner of Section
DQ KCC (NOTE: Locate well in section plat below.)

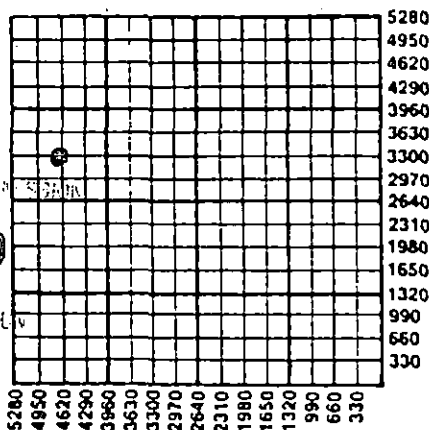
Lease Name Siemens Well # 1-29

Field Name N/A

Producing Formation Morrow

Elevation: Ground 2783 KB 2794

Total Depth 6000 PBDT 5639



Amount of Surface Pipe Set and Cemented at 1620 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

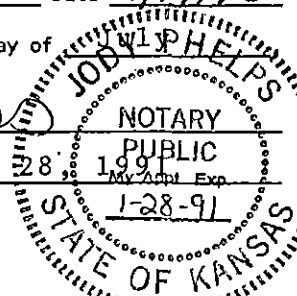
feet depth to _____ w/ _____ sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 R. F. Burke
Title R. F. BURKE Agent Date 7/19/90

Subscribed and sworn to before me this 19th day of JULY 1990.
Notary Public Jody Phelps
Date Commission Expires January 28, 1991



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

SIDE TWO

Operator Name Shepler & Thomas, Inc. Lease Name Siemens Well # #1-29
 Sec. 29 Twp. 32S Rge. 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
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)

Copies of above sent in with original Delayed Completion

Formation Description
 Log Sample
 Name Top Bottom

See original Delayed Completion

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
Surface	12 1/4	8 5/8	24#	1630	HLW	700	2% CC
Production	7 7/8	4 1/2	10.5	5680	50/50 poz	250	6% Halad 322 10% salt

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
1	5568-72, 5546-48, 5494-98	1500 gallons of 7 1/2% HCL acid, 25000 gals X-link, 52400# sd	Same Same

TUBING RECORD	Size 2 3/8	Set At 5488	Packer At N/A	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First Production 5-31-90 Producing Method Flowing Pumping Gas Lift Other (Explain) Plunger lift

Estimated Production Per 24 Hours	Oil Bbls. 17	Gas Mcf 130	Water Bbls. Trace	Gas-Oil Ratio 7647	Gravity 24.6°
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Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perforation Dually Completed Commingled Other (Specify) _____

Production Interval _____