

ORIGINAL

FORM MUST BE TYPED

SIDE ONE

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

Operator: License # 5038
Name: Robinson Oil Company
Address 300 West Douglas - Suite 420
City/State/Zip Wichita Kansas 67202
Purchaser: na
Operator Contact Person: Bruce Robinson
Phone (316) 262-6734
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Ben C. Landes
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:
Operator: Beacon Resources Corp
Well Name: Shore #1
Comp. Date 10/67 Old Total Depth 4588'
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 4557.44 PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
02-07-95 02-09-95 2/24/95
Spud Date of REENTRY Date Reached TD Completion Date

API NO. 15-095-200470001
County Kingman County, Kansas
NW SE NW _____ Sec. 25 Twp. 30S Rge. 6 E W
1650 Feet from S (circle one) Line of Section
1650 Feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name Shore "A" "OWWG" Well # 1
Field Name _____
Producing Formation None
Elevation: Ground 1359 KB 1367
Total Depth 4588' PBTD _____
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 _____
feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REENTRY 2/4 6-11-96
(Data must be collected from the Reserve Pit)
Chloride content unavailable ppm Fluid volume 200 bbls
Deswating method used evaporation
Location of fluid disposal if hauled offsite: _____
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 [Signature]
Title President Date 3/3/95
Subscribed and sworn to before me this 3rd day of March
19 95

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

Notary Public
CYNTHIA L. WOLF
Notary Public, State of Kansas
Date of Commission Expires 1/26/98
My Appt. Expires

RECEIVED
STATE CORPORATION COMMISSION
MAR 13 1995
CONSERVATION DIVISION
WICHITA, KANSAS

SIDE TWO

Operator Name Robinson Oil Company Lease Name Shore "A" Well # 1
 Sec. 25 Twp. 30S Rge. 6 East county Kingman County, Kansas
 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	none	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E.Logs Run:	CEMENT BOND		

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		4-1/2"	11.6#&10.5#	4584		350	

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" 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
6	4536-4538	250 gal MA	
6	3712-3814	750 gal 15%	
6	3666-3670	750 gal 15%	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
na						
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)			
ta	ta					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	na
	<input type="checkbox"/> Other (Specify) _____	

WELL DATA FIELD _____ SEC. 25 TWP. 30 RNG. 6W COUNTY KINGMAN STATE KS

FORMATION NAME _____ TYPE _____
FORMATION THICKNESS _____ FROM _____ TO _____
INITIAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD
COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____
PACKER TYPE _____ SET AT _____
BOTTOM HOLE TEMP. _____ PRESSURE _____
MISC. DATA _____ TOTAL DEPTH _____

Table with columns: NEW USED, WEIGHT, SIZE, FROM, TO, MAXIMUM PSI ALLOWABLE. Includes handwritten entries for CASING (1.560, 4 1/2, K5, 4584), LINER, TUBING, OPEN HOLE (4584, 88, SHOTS/FT.), and PERFORATIONS (ORIGINAL).

JOB DATA

Table with columns: CALLED OUT, ON LOCATION, JOB STARTED, JOB COMPLETED. Includes handwritten dates and times: DATE 2-8, TIME 0800; DATE 2-8, TIME 1130; DATE 2-8, TIME; DATE 2-8, TIME.

TOOLS AND ACCESSORIES

Table with columns: TYPE AND SIZE, QTY., MAKE. Includes handwritten entries: FLOAT COLLAR, FLOAT SHOE INSERT w/ A.H.D. 1 HUNCO, GUIDE SHOE, CENTRALIZERS 454/172, BOTTOM PLUG, TOP PLUG, HEAD, PACKER WELD DA 1#, OTHER INSERT w/ A.H.D. 1.

PERSONNEL AND SERVICE UNITS

Table with columns: NAME, UNIT NO. & TYPE, LOCATION. Includes handwritten entries: 74221 W.D.W.F., 40037, 25555; 61677 S.B.S.A., 4410, 2000; 55273 M.H.K.W., 4413, 3000; 137098 G.A.C.G., 50008, 3000.

MATERIALS

TREAT. FLUID _____ DENSITY _____ LB/GAL. API
DISPL. FLUID _____ DENSITY _____ LB/GAL. API
PROP. TYPE _____ SIZE _____ LB.
ACID TYPE _____ GAL. _____ %
SURFACTANT TYPE _____ GAL. _____ IN
NE AGENT TYPE _____ GAL. _____ IN
FLUID LOSS ADD. TYPE _____ GAL.-LB. _____ IN
GELLING AGENT TYPE _____ GAL.-LB. _____ IN
FRIC. RED. AGENT TYPE _____ GAL.-LB. _____ IN
BREAKER TYPE _____ GAL.-LB. _____ IN
BLOCKING AGENT TYPE _____ GAL.-LB. _____ IN
PERFPAC BALLS TYPE _____ QTY. _____
OTHER _____
OTHER _____

DEPARTMENT Cmt
DESCRIPTION OF JOB Set 4584' 4 1/2 Prod

JOB DONE THRU: TUBING [] CASING [] ANNULUS [] TBG/ANN. []

CUSTOMER REPRESENTATIVE X [Signature]

HALLIBURTON OPERATOR [Signature] COPIES REQUESTED _____

CEMENT DATA

Table with columns: STAGE, NUMBER OF SACKS, CEMENT, BRAND, BULK SACKED, ADDITIVES, YIELD CU.FT./SK., MIXED LBS./GAL. Includes handwritten entries: 75, 1/2, 55/65, 1.84, 12.7; 300, 510, 2% Col Seal, 15% oil, 8% LARD, 3% 11" D. Ann., 1.36, 15.4.

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____
BREAKDOWN _____ MAXIMUM _____
AVERAGE _____ FRACTURE GRADIENT _____
SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____
HYDRAULIC HORSEPOWER _____
ORDERED _____ AVAILABLE _____ USED _____
AVERAGE RATES IN BPM _____
TREATING _____ DISPL. _____ OVERALL _____
CEMENT LEFT IN PIPE _____
FEET 188 REASON Insert

SUMMARY

VOLUMES

PRESLUSH: BBL.-GAL. 12 TYPE MUD FLUSH
LOAD & BKDN: BBL.-GAL. _____ PAD: BBL.-GAL. _____
TREATMENT: BBL.-GAL. _____ DISPL: BBL.-GAL. 705
CEMENT SLURRY: BBL.-GAL. 2457 + 7266 = 77.1
TOTAL VOLUME: BBL.-GAL. _____

RECEIVED STATE CORPORATION C.

MAR 13 1995

CONSERVATION DIVISION WICHITA, KANSAS

CUSTOMER

CUSTOMER 2505300 0160 LEASE SHORE OWNED WELL NO. A-1 JOB TYPE 4 1/2 Prod DATE 2-8 95