

COPY

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 # 5123

Name: Pickrell Drilling Co., Inc.

Address 110 N. Market, Ste 205

City/State/Zip Wichita, Kansas 67202

Purchaser: N/A

Operator Contact Person: Jay McNeil

Phone (316) 262-8427

Contractor: Name: Company Tools

License: 5123

Wellsite Geologist: Bill Klaver

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abd.

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWWO: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

8/1/90 8/10/90 8/11/90

Spud Date Date Reached TD Completion Date

API NO. 15- 097-21,291-0000

County Kiowa

250' W SW NW Sec. 35 Twp. 29S Rge. 18 East West

3300' Ft. North from Southeast Corner of Section

4870' Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

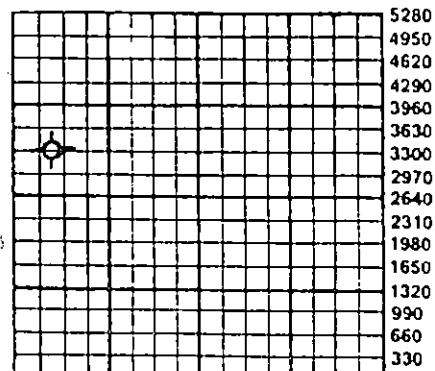
Lease Name Schmidt 'JJ' Well # 1

Field Name N/A

Producing Formation N/A

Elevation: Ground 2171 KB 2176

Total Depth 4953 PBD _____



6 1990
8-16-90
Wichita Kansas



A/I D/F 0

Amount of Surface Pipe Set and Cemented at 428 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set N/A Feet

If Alternate II completion, cement circulated from N/A

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 [Signature]

Title Geologist Date 8/15/90

Subscribed and sworn to before me this 15th day of August 19 90.

Notary Public [Signature]

Date Commission Expires 6.24.94

BRENDA A. BALDWIN
NOTARY PUBLIC
STATE OF KANSAS
MY APPT. EXPIRES 6.24.94

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 Pickrell Drilling Co., Inc. Lease Name Schmidt 'JJ' Well # 1
 Sec. 35 Twp. 29S Rge. 18 East County Kiowa
 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.)

Formation Description

Log Sample

Name	Top	Bottom
Heebner	4102	
Lansing	4296	
Stark	4558	
Cherokee	4845	
Mississippi	4909	

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 1/2	8 5/8"	20	428	60-40 poz. mix	200	2% gel, 3% cc

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	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 Production _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

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

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 _____