TYPE	AFFIDAVIT OF COMPLETION FO	ORM ACO-1 WELL HISTORY
SIDE ONE	· · · · · · · · · · · · · · · · · · ·	Compt
This for Derby B	82-3-130 and 82-3-107) rm shall be filed with the Kansas Corporat uilding, Wichita, Kansas 67202, within nin ion of a well, regardless of how the well	ety (90) days after the
F Le	ORMATION REGARDING THE NUMBER OF COPIES TO NG COPIES OF ACO-1 FORMS SEE PAGE TWO (2), tter requesting confidentiality attached. tach ONE COPY of EACH wireline log run (i.e., neutron log etc.)***Check here if NO lo	SIDE TWO (2) OF THIS FORM.  e. electrical log, sonic log,
PLEASE 1	FILL IN ALL INFORMATION. IF NOT AVAILABLE ECOMES AVAILABLE, SUBMIT BY LETTER.	
	9584 EXPIRATION DATE	3
	MacKellar, Inc.	· · · · · · · · · · · · · · · · · · ·
ADDRESS 26	501 NW Expy, S-203E	COUNTY Summer
<u>Ok</u>	cla, City, OK 73112	FIELD W. Drury
** CONTACT	PERSON <u>Jim MacKellar</u> PHONE <u>405</u> 8482877	PROD. FORMATION Dry Indicate if new pay.
PURCHASER_	1	LEASE Wirt
ADDRESS _		WELL NO. #1
·	·	WELL LOCATION
DRILLING CONTRACTOR	Hughes Drilling Co.	990 Ft. from <u>South</u> Line and
ADDRĘSS	P.O. Box 6001	330 Ft. from West Line of (F
<b></b>	: Enid OK 73701	the <u>SW</u> (Qtr.)SEC 11TWP35S RGE 2.
PLUGGING	Hughes Drilling Co.	WELL PLAT (Office Use Onl
CONTRACTOR ADDRESS	P.O. Box 6001	kcc $$
_	Enid, OK 73701	KGS /
TOTAL DEPTI	H4834' PBTD	SWD/REP_
SPUD DATE_	10-3-84 DATE COMPLETED 10-11-84	PLG.
ELEV: GR_	1104' DF 1109' KB 1110'	NGPA
	TH (CABLE) ROTARY (AIR) TOOLS.	
	OF DISPOSAL OR REPRESSURING WELL BEING SPOSE OF WATER FROM THIS LEASE	
	surface pipe set and cemented250'	<del></del>
nra) nrabo	MPLETION THIS AFFIDAVIT APPLIES TO: (Circlosal, Injection, Temporarily Abandoned.  Other completion	If OWWO, indicate type of re-
ALL REQUIR AND GAS IN	EMENTS OF THE STATUTES, RULES AND REGULATI DUSTRY HAVE BEEN FULLY COMPLIED WITH.	UG 1 0 1984
		NSERVATION DIVISION 0-18-1984 Wichita, Kansas
that:	Jim MacKellar ·, be	ing of lawful age, hereby certifies
I am t	the Affiant, and I am familiar with the co ents and allegations contained therein are	ntents of the foregoing Affidavit. true and correct.
Minimum Contractions	,	Sins, Mask Dlass
100	·4.	(Name)
SbBSCI	RIBED AND SWORN TO BEFORE ME this16	day of <u>October</u> ,
IN AND FOR		

\*\* The person who can be reached by phone regarding any questions conserving this

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