

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

191-21,954 -00-00

API NO: 15-.....
County..... Sumner
SW NW SE 16 35 4 East
..... Sec..... Twp..... Rge..... X West

Operator: License # 4494
Name Clifford Resources
Address 630 NE 63rd Suite 300
Oklahoma City, OK 73116
City/State/Zip

1550 Ft North from Southeast Corner of Section
2310 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Purchaser.....

Lease Name Sheldon Well # 1-16

Operator Contact Person Dan Reineke
Phone 405-840-1418

Field Name Hula

Producing Formation.....

Contractor: License # 5418
Name Allen Drilling Co.

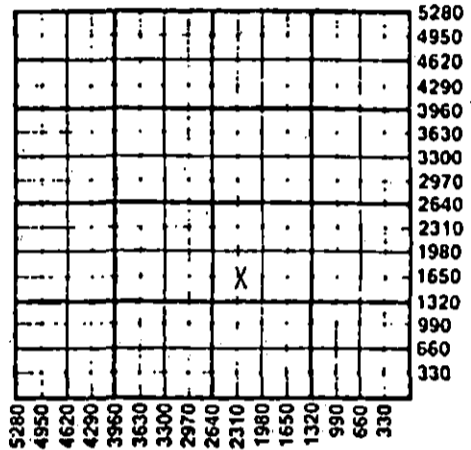
Elevation: Ground 1193 1199 KB.....

Wellsite Geologist Dan Bouknight
Phone 405-793-1400

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If OWNED: old well info as follows:
Operator,
Well Name,
Comp. Date, Old Total Depth.....

Section Plat



WATER SUPPLY INFORMATION
Disposition of Produced Water: _____ Disposal
Docket # _____ Repressuring

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable
1-02-87 1-12-87
Spud Date Date Reached TD Completion Date
5200
Total Depth PBDT

Amount of Surface Pipe Set and Cemented at 270 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to.....W/.....SX cmt
Cement Company Name,
Invoice #

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717
Source of Water:
Division of Water Resources Permit #.....
Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge East West
Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West
Other (explain).....
(purchased from city, R.W.D. #)

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. 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 *Brigitte Steinmann*
Title Brigitte Steinmann, Vice President Date 9-16-87

Subscribed and sworn to before me this 16th day of September 1987
Notary Public *John Long*
Date Commission Expires 10-22-88

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

Operator Name Clifford Resources Lease Name Sheldon Well # 1-16

Sec. 16 Twp. 35 Rge. 4 East West County Sumner

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

| Name | Top | Bottom |
|-------------|------|--------|
| Tonkawa | 3410 | 2211 |
| Mississippi | 4666 | 3467 |
| Woodford | 5022 | 3823 |
| Simpson | 5086 | 3887 |

| CASING RECORD <input checked="" type="checkbox"/> New <input 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 |
| surface | 12 1/4 | 8 5/8 | 23 | 270 | 60/40 poz | 165 | 3% cc 2% gel |
| production | 7 7/8 | 4 1/2 | 105 | 5200 | 50/59 poz | 300 | 10% class H |
| 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 | | | | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Size | Set At | Packer at | | | | | |
| | | | | | | | |
| Date of First Production well not completed yet | | Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain)..... | | | | | |
| Estimated Production Per 24 Hours | Oil | Gas | Water | Gas-Oil Ratio | Gravity | | |
| | Bbls | MCF | Bbls | CFPB | | | |

METHOD OF COMPLETION

Production Interval

Disposition of gas: Vented Open Hole Perforation
 Sold Other (Specify)
 Used on Lease Dually Completed
 Commingled