

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # ...5004
Name Vincent Oil Corporation
Address 125 No. Market Suite 1110
Wichita, Kansas 67202
City/State/Zip

Purchaser

Operator Contact Person ..Richard A. Hiebsch
Phone (316) 262-3573

Contractor: License # ...5107
Name H-30 Drilling, Inc.

Wellsite Geologist..Chuck Schmidt
Phone (316) 262-3573

Designate Type of Completion
 New Well Re-Entry Workover

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

If OWNO: old well info as follows:
Operator Wells Energy Company
Well Name #1 Graves
Comp. Date 8-5-79 Old Total Depth 5033

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable
8-6-87 8-7-87 8-7-87
Spud Date Date Reached TD Completion Date

..711.....
Total Depth PBD
* Old well surface set at.....
Amount of Surface Pipe Set and Cemented at 451 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

API NO. 15-.....097-20,551-A
County.....Kiowa
Approx. C.NE .SW. .NE. Sec..9. Twp..29 Rge..18 East West

3630.... Ft North from Southeast Corner of Section
1650.... Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

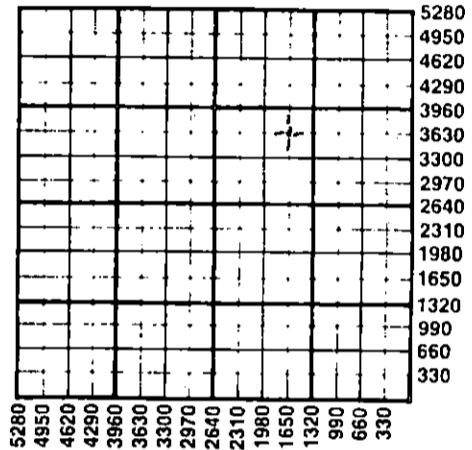
Lease Name.....Graves "B" Well #.....1 OWWO

Field Name.....

Producing Formation.....

Elevation: Ground.....2283 KB.....2278

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal Repressuring
Docket #

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 duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 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 ..Richard A. Hiebsch
Richard A. Hiebsch
Title.....Vice President Date ..8-20-87..

Subscribed and sworn to before me this 20th day of August 1987.
Notary Public.....Julie K. Stout
Date Commission Expires.....July 23, 1989

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
RECEIVED JULIE K. STOUT
STATE CORPORATION COMMISSION
AUG 21 1987



Sec. 9, Twp 29 Rge 18

SIDE TWO

Operator Name Vincent Oil Corporation Lease Name Graves "B" Well # J OWWO

Sec. 9 Twp. 29S Rge. 18 East West County Kiowa

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

*Old well information

CASING RECORD <input 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"		45'			
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			
Date of First Production		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