

This form shall be filed in duplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed.

Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on side one will be of public record and side two will then be held confidential.

Circle one: Oil, Gas, Dry, SWD, OWWO, Injection. Type and complete ALL sections.

Applications must be filed for dual completion, commingling, SWD and injection, T.A.

Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). KCC # (316) 263-3238. (Rules 82-2-105 & 82-2-125)

OPERATOR Dakota Resources, Inc.

API NO. 15-185-21,497-0000

ADDRESS 2900 Security Life Building

COUNTY Stafford

Denver, CO 80202

FIELD _____

**CONTACT PERSON Don M. Erickson

PROD. FORMATION D & A

PHONE 303-825-2900

LEASE KACHELMAN

PURCHASER _____

WELL NO. 1

ADDRESS _____

WELL LOCATION NE SE NE

DRILLING Allen Drilling Company

_____ Ft. from _____ Line and

CONTRACTOR _____

_____ Ft. from _____ Line of

ADDRESS P.O. Box 1389

the SEC. 14 TWP. 25 RGE. 14 W

Great Bend, KS 67530

WELL PLAT

PLUGGING Allen Drilling Company

CONTRACTOR _____

ADDRESS P.O. Box 1389

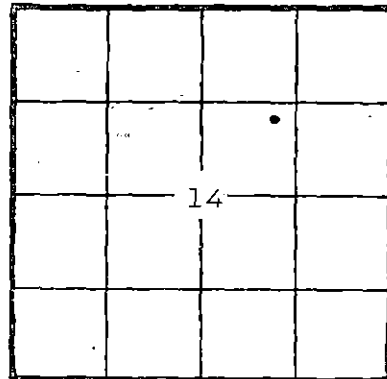
Great Bend, KS 67530

TOTAL DEPTH 4358' PBD _____

SPUD DATE 4/03/82 DATE COMPLETED 4/10/82

ELEV: GR 1963' DF 1965' KB 1958'

DRILLED WITH (GABLE) (ROTARY) (AIR) TOOLS _____



KCC
KGS
(Office Use)

Amount of surface pipe set and cemented @ 253' DV Tool Used? _____

A F F I D A V I T

STATE OF Colorado, COUNTY OF Denver SS, I,

Don M. Erickson OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH, DEPOSES THAT HE IS Manager of Operations (FOR) (OF) DAKOTA RESOURCES, INC.

OPERATOR OF THE KACHELMAN LEASE, AND IS DULY AUTHORIZED TO MAKE

THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 1 ON

SAID LEASE HAS BEEN COMPLETED AS OF THE 10 DAY OF April, 1982, AND THAT

ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIRMATION IS NOT REQUIRED.

(S) [Signature]

SUBSCRIBED AND SWORN BEFORE ME THIS _____ DAY OF _____, 1982.

NOTARY PUBLIC

MY COMMISSION EXPIRES: _____

**The person who can be reached by phone regarding any questions concerning this information. Within 45 days of completion, a witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.

SIDE TWO

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION; CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
				LOG TOPS
			Heebner	3543
			Brown Lime	3696
			Lansing	3722
			Base/KC	3982
			Viola	4188
			Simpson Shale	4282
			Simpson Sand	4300
			Arbuckle	4338

Report of all strings set — surface, intermediate, production, etc. CASING RECORD (New) or (Used)

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
surface	12 1/4"	8-5/8"	20#	@ 253'	60/40 poz	200	2% gel, 3% cc

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD

Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity
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RATE OF PRODUCTION PER 24 HOURS	Oil bbls.	Gas MCF	Water %	Gas-oil ratio bbls.	CFPB
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Disposition of gas (vented, used on lease or sold)

Perforations