

AFFIDAVIT OF COMPLETION FORM

ACO-1

This form shall be filed in triplicate 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. Circle one: Oil, gas, dry, SWD, OWWO, injection. Type and complete ALL sections. Applications must be filed for dual completion, commingling, salt water disposal and injection. Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.) KCC#-(316)263-3238.

OPERATOR Western Drilling & Exploratinn, Inc. API NO. 15 -155-20,831-000

ADDRESS 439 Wheatland Place COUNTY Reno

Wichita, KS 67235 FIELD Burton

**CONTACT PERSON Donald Bramwell PROD. FORMATION _____

PHONE 316-722-3174 LEASE Graber

PURCHASER _____ WELL NO. #2

ADDRESS _____ WELL LOCATION NE SW NE

DRILLING Aspen Oil, Inc. **RECEIVED** 1650 Ft. from E Line and

CONTRACTOR STATE CORPORATION COMMISSION 1650 Ft. from N Line of

ADDRESS 7700 W. Kellogg JUN - 4 1982 the 34 SEC.23S TWP.4W RGE.

Wichita, KS CONSERVATION DIVISION

PLUGGING United Cementing Co. Wichita, Kansas

CONTRACTOR _____

ADDRESS Box 712

El Dorado, KS 67042

TOTAL DEPTH 3623 PBDT _____

SPUD DATE 10/4/81 DATE COMPLETED 10/21/81

ELEV: GR 1467 DF 1470 KB 1472

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS _____ (New) / (Used) casing.

CASING RECORD

Report of all strings set—surface, intermediate, production, etc.

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	15" --	10 3/4"	40 Lbs	199'	Common	200	2% Gel 3% CACL
Surface	7 7/8"	8 5/8"	20 lbs	597'	Common	125	2% Gel 3% CACL

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

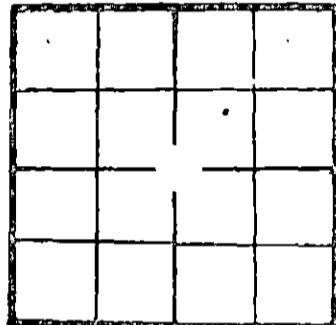
ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	Gravity

RATE OF PRODUCTION PER 24 HOURS	Oil	Gas	Water	Gas-oil ratio
	bbis.	MCF	%	bbis.

Disposition of gas (vented, used on lease or sold) _____ Perforations _____



WELL PLAT

KCC _____
KGS _____
MISC _____
(Office Use)

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

Estimated height of cement behind Surface Pipe Total _____.

DV USED? None

WELL LOG

Formation Description, Contents, etc.	Top	Bottom	Name	Depth

A F F I D A V I T

STATE OF Kansas, COUNTY OF Sedgwick SS, _____

Donald G. Bramwell OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH,

DEPOSES THAT HE IS President (FOR)(OF) Western Drilling & Exploration

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

THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 2 ON

SAID LEASE HAS BEEN COMPLETED AS OF THE 21 DAY OF October, 1981, AND THAT

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

FURTHER AFFIANT SAITH NOT.

(S) Donald G. Bramwell

SUBSCRIBED AND SWORN BEFORE ME THIS 20 DAY OF May 1982

Patricia A. Brasel
NOTARY PUBLIC

MY COMMISSION EXPIRES:

