

AFFIDAVIT AND COMPLETION FORM

ACO-1

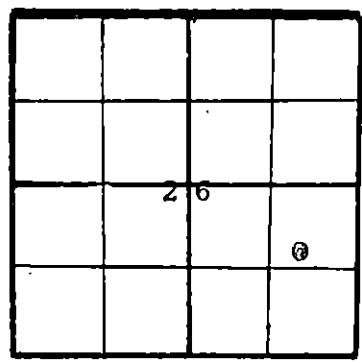
This form must be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within five days after the completion of the well, regardless of how the well was completed. Circle one: Oil gas, dry, SWD, OWWO, injection. Please type. Complete ALL sections. 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 W. L. KIRKMAN, INC. API NO. 15-185-21,319-0000
ADDRESS 453 South Webb Road/ P.O. Box 18611 COUNTY Stafford
Wichita, Kansas 67206 FIELD Ahnert
**CONTACT PERSON WAYNE L. KIRKMAN LEASE Spatz
PHONE (316) 685-5372

PURCHASER GETTY WELL NO. 2
ADDRESS Box 3000 WELL LOCATION _____
Tulsa, Oklahoma 74102 1930Ft. from South Line and
430 Ft. from East Line of

DRILLING CONTRACTOR WOODMAN-IANNITTI RIG #3 the SE/4 SEC. 26 TWP. 22S RGE. 13W.
ADDRESS 1008 Douglas Bldg., 104 S. Broadway
Wichita, Kansas 67202

PLUGGING CONTRACTOR _____
ADDRESS _____
TOTAL DEPTH 3743 PBTD _____
SPUD DATE 6/18/81 DATE COMPLETED 6/25/81
ELEV: GR 1883DF KB 1888



WELL PLAT
(Quarter) or (Full) Section - Please indicate.

KCC
KGS
MISC.

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS
Report of all strings set— surface, intermediate, production, etc. (New)/(Used) casing.

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"	24 lb.	325	Common	225	2% Gel 3% CC

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

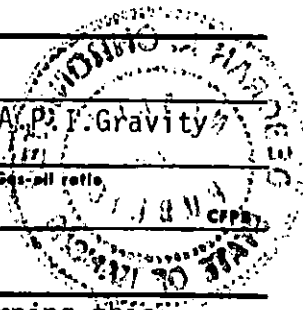
TUBING RECORD		Pecker set at
Size	Setting depth	

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

TEST DATE:		PRODUCTION	
Date of first production	Producing method (flowing, pumping, gas lift, etc.)		
<u>TIGHT HOLE</u>			
RATE OF PRODUCTION PER 24 HOURS	Oil	Gas	Water
	bbls.	bbls.	MCF
Disposition of gas (vented, used on lease or sold)	Producing interval(s)		
	<u>TIGHT HOLE</u>		

** 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.



Name of lowest fresh water producing stratum Ogallala Aquifer Depth 180
 Estimated height of cement behind pipe 325

WELL LOG

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

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.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
TIGHT HOLE				

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

A F F I D A V I T

STATE OF KANSAS, COUNTY OF SEDGWICK SS,

KIRBY C. EVERS OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS

OATH, DEPOSES AND SAYS:

THAT HE IS VICE-PRESIDENT FOR W. L. KIRKMAN, INC.

OPERATOR OF THE SPATZ LEASE, AND IS DULY AUTHORIZED TO MAKE THIS

AFFIDAVIT FOR AND ON BEHALF OF SAID OPERATOR, THAT WELL NO. 2 ON SAID LEASE HAS

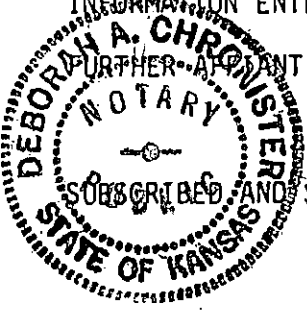
BEEN COMPLETED AS OF THE 25th DAY OF JUNE 19 81, AND THAT ALL

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

FURTHER AFFIDANT SAITH NOT.

(S) Kirby C. Evers

SUBSCRIBED AND SWORN TO BEFORE ME THIS 6th DAY OF NOVEMBER 19 81



Deborah A. Chronister
 NOTARY PUBLIC

My Appointment Expires Dec. 10, 1984

MY COMMISSION EXPIRES: _____