

FORM MUST BE TYPED

SIDE ONE

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

*Rec'd
11-14-94*

Operator: License # 6484

Name: ANDERSON ENERGY, INC.

Address 200 E. First

Suite # 414

City/State/zip Wichita, KS 67202

Purchaser: None

Operator Contact Person: William L. Anderson

Phone (316) 265-7929

Contractor: Name: White & Ellis Drilling

License: 5420

Wellsite Geologist: None

Designate Type of Completion
 New Well Re-Entry Workover

- Oil SWD SIOW Temp. Abd.
- Gas ENHR SIGW
- Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: Virginia Drilling Co.

Well Name: #1 Wells

Comp. Date 12-10-48 Old Total Depth 3715

- Deepening Re-perf. Conv. to Inj/SWD
- Plug Back PBTD
- Commingled Docket No. _____
- Dual Completion Docket No. _____
- Other (SWD or Inj?) Docket No. _____

10-10-94 10-11-94 11-4-94
Date of ~~Spud~~ REENTRY Date Reached TD Completion Date

API NO. 15- 185-01053 ORIGINAL

County Stafford

Approx. SE-SE-SW Sec. 32 Twp. 22 Rge. 11 XXX^E

385 Feet from SYN (circle one) Line of Section

2215 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Ochs "OWWO" Well # 2

Field Name Richardson

Disposal
Producing Formation Arbuckle

Elevation: Ground 1806 KB 1811

Total Depth 3815 PBTD _____

Amount of Surface Pipe Set and Cemented at 206 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan REENTRY JH 8-21-95
(Data must be collected from the Reserve Pit)

Chloride content 90,000 ppm Fluid volume 300 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 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 geologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST BE ATTACHED. 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 William L. Anderson

Title Secretary - Treasurer Date 11-10-94

Subscribed and sworn to before me this 10 day of November 19 94.

Notary Public Linda D. Rausch

Date Commission Expires 10/3/98

LINDA D. RAUSCH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 10/3/98

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	XCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NSPA
<input type="checkbox"/>	XGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)

PI

Operator Name ANDERSON ENERGY, INC. Lease Name OCHS Well # 2
 Sec. Twp. Rge. East West
 County Stafford

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Heebner	3012	(-1205)
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Brown Lime	3238	(-1431)
List All E.Logs Run:		Lansing	3269	(-1462)
		Simpson Shale	3615	(-1808)
		Arbuckle	3675	(-1868)
		Old RTD	3715	(-1908)
		New RTD	3815	(-2008)

CASING RECORD <input type="checkbox"/> New <input checked="" 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"	unknown	206'	unknown	unknown	unknown
Production	7 7/8	5 1/2	14	3689	60-40 poz	150	2% gel 374% gilsonite

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
		2000. gal 28%	3689-3815'
	3689'-3815' OPEN HOLE		

TUBING RECORD	Size <u>2 7/8"</u>	Set At <u>3660'</u>	Packer At <u>3660'</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio
				Gravity

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval Disposal: 3689-3815

ALLIED CEMENTING CO., INC.

15-185-01053-0001

1130

EMIT TO "P.O. BOX 31
RUSSELL, KANSAS 67665

ORIGINAL

SERVICE POINT:

Great Bend

DATE <u>10-11-94</u>	SEC. <u>32</u>	TWP. <u>22</u>	RANGE <u>11</u>	CALLED OUT <u>4:00 AM</u>	ON LOCATION <u>6:00 AM</u>	JOB START <u>10:03</u>	JOB FINISH <u>10:33</u>
LEASE <u>Ochs</u>	WELL# <u>2</u>	LOCATION <u>Hudson + Stafford BKTP.</u>		COUNTY <u>Stafford</u>		STATE <u>KS</u>	

OLD OR NEW (Circle one)

CONTRACTOR <u>White & Ellis Drlg.</u>	OWNER <u>Same</u>
TYPE OF JOB <u>PIPE JOB</u>	CEMENT
HOLE SIZE <u>7 7/8</u>	T.D. <u>3815</u>
CASING SIZE <u>5 1/2</u>	DEPTH <u>3685.07</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS. <u>DISP 88.89</u>	
EQUIPMENT	
PUMP TRUCK # <u>181</u>	CEMENTER <u>Don H</u>
	HELPER <u>Tim D</u>
BULK TRUCK #	DRIVER
BULK TRUCK # <u>101</u>	DRIVER <u>RICK W</u>

AMOUNT ORDERED <u>150 sk</u>	<u>69/40 2 1/2 gal</u>
<u>34 gal @ .010 FRA</u>	<u>5# Gilsonite/sk</u>
COMMON <u>90</u>	@ <u>5.75</u> = <u>517.50</u>
POZMIX <u>60</u>	@ <u>3.00</u> = <u>180.00</u>
GEL <u>3</u>	@ <u>9.00</u> = <u>27.00</u>
CHLORIDE	
<u>FRA-11</u>	@ <u>4.25</u> = <u>46.75</u>
<u>Gilsonite 750</u>	@ <u>.39</u> = <u>292.50</u>
HANDLING <u>150</u>	@ <u>1.00</u> = <u>150.00</u>
MILEAGE <u>25</u>	= <u>150.00</u>
TOTAL <u>1363.75</u>	

REMARKS:

Plugged PH Pumped 20 bbl
Water Flush Pumped all cement
Released plug displaced
Down Landed plug 1000' Released.
Back insert Dr Hold
By Allied Cementing
Thank's Don
Hair

SERVICE

DEPTH OF JOB <u>3685'</u>	
PUMP TRUCK CHARGE	<u>980.00</u>
EXTRA FOOTAGE	@
MILEAGE <u>25</u>	@ <u>2.25</u> = <u>56.25</u>
PLUG <u>5 1/2"</u>	@ <u>45.00</u> = <u>45.00</u>
TOTAL	<u>#1081.25</u>

CHARGE TO: Anderson Energy Inc.
 STREET 200 E. 1st #414
 CITY Wichita STATE KS ZIP 67202

FLOAT EQUIPMENT

@	
@	
@	
@	
TOTAL	

TAX - 0 -
 TOTAL CHARGE 2445.00
 DISCOUNT 366.75 IF PAID IN 30 DAYS

To Allied Cementing Co., Inc.
 You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE T. C. Pearson

RECEIVED
 STATE CORPORATION COMMISSION
 NOV 14 1994
 CONSERVATION DIVISION
 WICHITA, KANSAS