

SIDE ONE

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

API NO. 15- 185-22,648-0000
County Stafford

SW NW SE Sec. 4 Twp. 22 Rge. 14 East West

1650 Ft. North from Southeast Corner of Section
2310 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

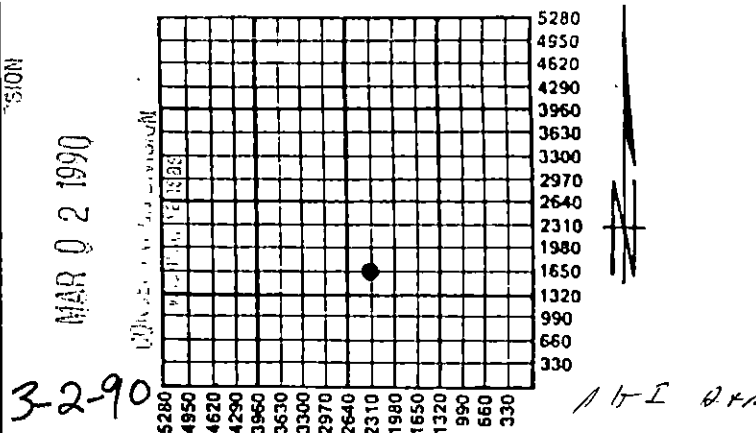
Lease Name Neeland Well # 1

Field Name Radium Townsite

Producing Formation D & A

Elevation: Ground 1940 KB 1945

Total Depth 3900 PBYD _____



Amount of Surface Pipe Set and Cemented at 431' 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.

Operator: License # 9705

Name: Mid-American Hydrocarbon, Inc.

Address 114 East Avenue North

City/State/Zip Iyons, KS 67554

Purchaser: _____

Operator Contact Person: Kerry Davison

Phone (316) 257-5111

Contractor: Name: Boger Brothers Drilling, Inc.

License: 9421

Wellsite Geologist: Dan DeBoer

Designate Type of Completion
 New Well _____ Re-Entry _____ Workover
_____ Oil _____ SWD _____ Temp. Abd.
_____ Gas _____ Inj _____ Delayed Comp.
 Dry _____ Other (Core, Water Supply, etc.)

If CWMO: old well info as follows:
Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary _____ Air Rotary _____ Cable log

2-5-90 2-10-90 2-10-90
Spud Date Date Reached TD Completion Date

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-1 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 [Signature]
Title President Date 2/26/90

Subscribed and sworn to before me this 26th day of February, 19 90.

Notary Public [Signature]

Date Commission Expires 4-4-98



K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
 Wireline Log Received
C _____ Drillers Timelog Received
Distribution
 KCC _____ SWD/Rep _____ NGPA
 KGS _____ Plug _____ Other
(Specify)

SIDE TWO

Operator Name Mid-American Hydrocarbon, Inc. Lease Name Neeland Well # 1

Sec. 4 Twp. 22 Rge. 14 East County Stafford
 West

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets.) Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy.)	<p align="center">Formation Description</p> <p align="center"><input type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Bottom</th> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>	Name	Top	Bottom						
Name	Top	Bottom								

CASING RECORD New 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		8 5/8		431	Standard	165	Pozmix A Halliburton Gel. 2% Anhydrous CC

Shots Per Foot	PERFORATION RECORD Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth

TUBING RECORD Size Set At Packer At Liner Run Yes No

Date of First Production Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

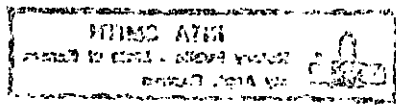
Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____



SIDE TWO

Operator Name Mid-American Hydrocarbon, Inc. Lease Name Neeland Well # 1
 Sec. 4 Twp. 22 Rge. 14 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.

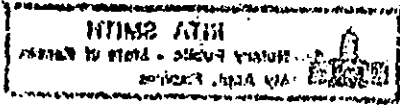
Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Formation Description <input type="checkbox"/> Log <input checked="" type="checkbox"/> Sample <table border="1"> <thead> <tr> <th>Name</th> <th>Top</th> <th>Bottom</th> </tr> </thead> <tbody> <tr> <td>Anhydrite</td> <td>856</td> <td>(+1090)</td> </tr> <tr> <td>Heebner</td> <td>3338</td> <td>(-1392)</td> </tr> <tr> <td>Lansing</td> <td>3467</td> <td>(-1521)</td> </tr> <tr> <td>Viola</td> <td>3756</td> <td>(-1810)</td> </tr> <tr> <td>Simpson</td> <td>3802</td> <td>(-1856)</td> </tr> <tr> <td>Arbuckle</td> <td>3861</td> <td>(-1915)</td> </tr> </tbody> </table>	Name	Top	Bottom	Anhydrite	856	(+1090)	Heebner	3338	(-1392)	Lansing	3467	(-1521)	Viola	3756	(-1810)	Simpson	3802	(-1856)	Arbuckle	3861	(-1915)
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Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No																						
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No																						

CASING RECORD <input type="checkbox"/> Now <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		8 5/8		431	Standard	165	Pozmix A Halliburton Anhydrous CC
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 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 Perforation Dually Completed Coningled Other (Specify) _____

Production Interval _____



ORIGINAL



REMIT TO:
P.O. BOX 951046
DALLAS, TX 75395-1046
REC'D FEB 09 1990

INVOICE

HALLIBURTON SERVICES

A Halliburton Company

INVOICE NO.	DATE
914029	02/05/1990

WELL LEASE NO./PLANT NAME		WELL/PLANT LOCATION		STATE	WELL/PLANT OWNER
NEELAND 1		STAFFORD		KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE		TICKET DATE	
GREAT BEND	BOGER BROS. DRILLING	CEMENT SURFACE CASING		02/05/1990	
ACCT. NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER	SHIPPED VIA	FILE NO.
579469	J.D. RIORDAN			COMPANY TRUCK	90102

MID AMERICAN HYDROCARBON
114 EAST AVE. NORTH
LYONS, KS 67554

DIRECT CORRESPONDENCE TO:
SUITE 600
COLORADO DERBY BUILDING
WICHITA, KS 67202-0000

PRICE REF. NO.	DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE	20	MI	2.20	44.00
		1	UNT		
001-016	CEMENTING CASING	430	FT	447.00	447.00
		1	UNT		
030-503	WOODEN TOP PLUG	8 5/8	IN	59.00	59.00
		1	EA		
504-308	STANDARD CEMENT	165	SK	5.35	882.75
506-105	POZMIX A	110	SK	2.79	306.90
506-121	HALLIBURTON-GEL 2%	5	SK	.00	N/C
509-406	ANHYDROUS CALCIUM CHLORIDE	7	SK	26.25	183.75
500-207	BULK SERVICE CHARGE	289	CFT	.95	274.55
500-306	MILEAGE CMTG MAT DEL OR RETURN	246.83	TMI	.70	172.78
INVOICE SUBTOTAL					2,370.73
DISCOUNT-(BID)					426.71-
INVOICE BID AMOUNT					1,944.02
*-KANSAS STATE SALES TAX					63.45
*-BARTON COUNTY SALES TAX					14.94
INVOICE TOTAL - PLEASE PAY THIS AMOUNT =====>					\$2,022.41 /

MAR 02 1990

TERMS INVOICES PAYABLE NET BY THE 20TH OF THE FOLLOWING MONTH AFTER DATE OF INVOICE. UPON CUSTOMER'S DEFAULT IN PAYMENT OF CUSTOMER'S ACCOUNT BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE INVOICE IS DATED, CUSTOMER AGREES TO PAY INTEREST THEREON AFTER DEFAULT AT THE HIGHEST LAWFUL CONTRACT RATE APPLICABLE BUT NEVER TO EXCEED 18% PER ANNUM. IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY TO ENFORCE COLLECTION OF SAID ACCOUNT, CUSTOMER AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY FEES IN THE AMOUNT OF 20% OF THE AMOUNT OF THE UNPAID ACCOUNT.

ORIGINAL



REC'D FEB 14 1990

REMIT TO:

P.O. BOX 951046

DALLAS, TX 75395-1046

HALLIBURTON SERVICES

INVOICE

A Halliburton Company

INVOICE NO.	DATE
914105	02/11/1990

WELL LEASE NO./PLANT NAME	WELL/PLANT LOCATION	STATE	WELL/PLANT OWNER
NEELAND 1	STAFFORD	KS	SAME
SERVICE LOCATION	CONTRACTOR	JOB PURPOSE	TICKET DATE
GREAT BEND	BOGER BROS. DRILLING	PLUG TO ABANDON	02/11/1990
ACCT NO.	CUSTOMER AGENT	VENDOR NO.	CUSTOMER P.O. NUMBER
579469	ARTHUR E. HUNT		
		SHIPPED VIA	FILE NO.
		COMPANY TRUCK	90352

MID AMERICAN HYDROCARBON
 114 EAST AVE. NORTH
 LYONS, KS 67554

DIRECT CORRESPONDENCE TO:
 SUITE 600
 COLORADO DERBY BUILDING
 WICHITA, KS 67202-0000

PRICE REF. NO.	DESCRIPTION	QUANTITY	U/M	UNIT PRICE	AMOUNT
PRICING AREA - MID CONTINENT					
000-117	MILEAGE	20	MI	2.20	44.00
		1	UNT		
090-910	MISCELLANEOUS PUMPING JOB	1	TRK	370.00	370.00
030-503	WOODEN PLUG	8 5/8	IN	59.00	59.00
		1	EA		
504-308	STANDARD CEMENT	69	SK	5.35	369.15
506-105	POZMIX A	46	SK	2.79	128.34
506-121	HALLIBURTON-GEL 2%	2	SK	.00	N/C
507-277	HALLIBURTON-GEL BENTONITE	4	SK	13.00	52.00
500-207	BULK SERVICE CHARGE	115	CFT	.95	109.25
500-306	MILEAGE CMTG MAT DEL OR RETURN	104.83	TMI	.70	73.38
	INVOICE SUBTOTAL				1,205.12
	DISCOUNT-(BID)				216.90-
	INVOICE BID AMOUNT				988.22
	*-KANSAS STATE SALES TAX				39.94
	*-BARTON COUNTY SALES TAX				9.40
	INVOICE TOTAL - PLEASE PAY THIS AMOUNT				\$1,037.56 ✓

MAR 02 1990

CONSENTED TO BY DIVISION Kansas

TERMS INVOICES PAYABLE NET BY THE 20TH OF THE FOLLOWING MONTH AFTER DATE OF INVOICE. UPON CUSTOMER'S DEFAULT IN PAYMENT OF CUSTOMER'S ACCOUNT BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE INVOICE IS DATED, CUSTOMER AGREES TO PAY INTEREST THEREON AFTER DEFAULT AT THE HIGHEST LAWFUL CONTRACT RATE APPLICABLE BUT NEVER TO EXCEED 18% PER ANNUM. IN THE EVENT IT BECOMES NECESSARY TO EMPLOY AN ATTORNEY TO ENFORCE COLLECTION OF SAID ACCOUNT, CUSTOMER AGREES TO PAY ALL COLLECTION COSTS AND ATTORNEY FEES IN THE AMOUNT OF 20% OF THE AMOUNT OF THE UNPAID ACCOUNT.