

ORIGINAL

SIDE ONE

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

Operator: License # 5003
Name: McCoy Petroleum Corporation
Address 110 S. Main, Suite 500
City/State/Zip Wichita, KS 67202

Purchaser: _____
Operator Contact Person: Roger McCoy
Phone (316) 265-9697

Contractor: Name: Abercrombie Drilling, Inc.
License: 5422

Wellsite Geologist: Wayne Lebsack/Bob O'Dell

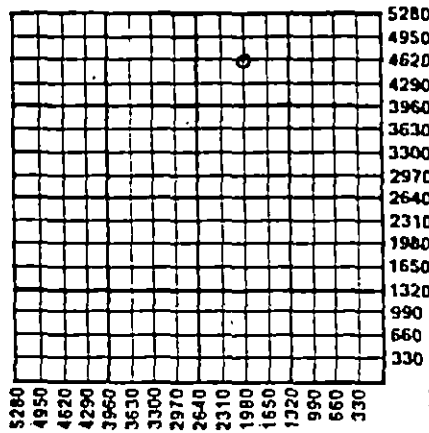
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If OWM: old well info as follows:
Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable
7-5-90 7-17-90 8-16-90
Spud Date Date Reached TD Completion Date

API NO. 15- 055-20,922-0000
County Finney
C NW NE Sec. 18 Twp. 21S Rge. 34 East West
4620 Ft. North from Southeast Corner of Section
1980 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

Lease Name Foster B Well # 1-18
Field Name Christabelle
Producing Formation _____
Elevation: Ground 3043' KB 3048'
Total Depth 5000 PBTD _____



Amount of Surface Pipe Set and Cemented at 318' 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.

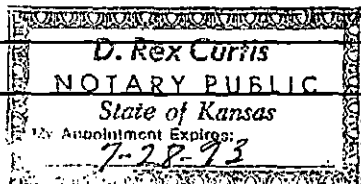
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 apply. Information on side two of this form will be held confidential 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-4 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 Margaret M. Curran
Title Vice President Date 8/12/90

Subscribed and sworn to before me this 12 day of September, 19 90.

Notary Public D. Rex Curtis
Date Commission Expires _____



K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)
SEP 11 1990

SIDE TWO

Operator Name McCoy Petroleum Corporation Lease Name Foster B Well # 1-18

Sec. 18 Twp. 21S Rge. 34 East West
 County Finney

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.

<p>Drill Stem Tests Taken <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets.)</p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy.)</p>	<p style="text-align: center;">Formation Description</p> <p><input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Name</th> <th style="width:20%;">Top</th> <th style="width:20%;">Bottom</th> </tr> </thead> <tbody> <tr><td>Heebner</td><td>3884</td><td></td></tr> <tr><td>Lansing</td><td>3991</td><td></td></tr> <tr><td>Marmaton</td><td>4436</td><td></td></tr> <tr><td>Cherokee</td><td>4580</td><td></td></tr> <tr><td>Morrow Shale</td><td>4800</td><td></td></tr> <tr><td>Morrow Sand</td><td>4845</td><td></td></tr> <tr><td>St. Genevieve</td><td>4851</td><td></td></tr> <tr><td>St. Louis</td><td>4900</td><td></td></tr> <tr><td>LTD</td><td>4997</td><td></td></tr> </tbody> </table>	Name	Top	Bottom	Heebner	3884		Lansing	3991		Marmaton	4436		Cherokee	4580		Morrow Shale	4800		Morrow Sand	4845		St. Genevieve	4851		St. Louis	4900		LTD	4997	
Name	Top	Bottom																													
Heebner	3884																														
Lansing	3991																														
Marmaton	4436																														
Cherokee	4580																														
Morrow Shale	4800																														
Morrow Sand	4845																														
St. Genevieve	4851																														
St. Louis	4900																														
LTD	4997																														

<p>CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> Used</p> <p>Report all strings set-conductor, surface, intermediate, production, etc.</p>							
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	24#	318	Premium	200	2% cc. 1# Floccel/sx.
Production	7-7/8	4 1/2"	10.5#	2833	50/50 Poz.	85	3/4% of CPH-2 10% salt
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated			Depth			
4H/F	2650-58			250/gal 15% FE			
				Frac w/5000# 20/40 sand & 200 B./jelled water			
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Size		Set At		Packer At			
Date of First Production		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
Non-Commercial							
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) non-commercial, will plug & abandon

Production Interval

DST #1 4166-4201' (L-KC)

Open 30", S.I. 45", Open 60", S.I. 60"

Weak blow throughout both open periods.

Recovered 660' of salt water (60,000 ppm chlorides)

FP 67-168# 236-360#

ISIP 928# FSIP 1084#

DST #2 4800-4843' (Morrow)

Open 30", S.I. 45", Open 30", S.I. 60"

Very weak blow through 1st open period.

Dead on 2nd open period.

Recovered 15' of mud.

FP 30-30# 30-30#

ISIP 30# FSIP 30#.

DST #3 4800-4866' (Morrow)

Open 30", S.I. 45", Open 60", S.I. 60"

Strong blow throughout both open periods.

Recovered 78' of watery mud,

720' of water.

FP 74-244# 302-429#

ISIP 776# FSIP 755#

DISTRICT 64-2-16 65 DATE 7-17-90

TO: HALLIBURTON SERVICES YOU ARE HEREBY REQUESTED TO FURNISH EQUIPMENT AND SERVICEMEN TO DELIVER AND OPERATE THE SAME AS AN INDEPENDENT CONTRACTOR TO: L. Resnik Oil Company (CUSTOMER) AND DELIVER AND SELL PRODUCTS, SUPPLIES, AND MATERIALS FOR THE PURPOSE OF SERVICING

WELL NO. 1-11 LEASE FOUR R-B SEC. 18 TWP. 21 RANGE 34

FIELD _____ COUNTY Texas STATE TX OWNED BY L. Resnik Oil Co.

THE FOLLOWING INFORMATION WAS FURNISHED BY THE CUSTOMER OR HIS AGENT

FORMATION NAME _____ TYPE _____
FORMATION THICKNESS _____ FROM _____ TO _____
PACKER: TYPE _____ SET AT _____
TOTAL DEPTH 2600' MUD WEIGHT _____
BORE HOLE 7 7/8"
INITIAL PROD: OIL _____ BPD, H₂O _____ BPD, GAS _____ MCF
PRESENT PROD: OIL _____ BPD, H₂O _____ BPD, GAS _____ MCF

	NEW USED	WEIGHT	SIZE	FROM	TO	MAX. ALLOW. P.S.I.
CASING	N	150.5	4 1/2	15R	2932.28	
LINER						
TUBING						
OPEN HOLE			7 7/8	15R	500.0'	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

PREVIOUS TREATMENT: DATE _____ TYPE _____ MATERIALS _____

TREATMENT INSTRUCTIONS: TREAT THRU TUBING ANNULUS CASING TUBING/ANNULUS HYDRAULIC HORSEPOWER ORDERED _____

Comment 4 1/2 heavy staining
+ subs surface 2 class H comment 10 to 30 FT, 12 1/2" Gelsuite, 14 to 20 R-2
Display with report

CUSTOMER OR HIS AGENT WARRANTS THE WELL IS IN PROPER CONDITION TO RECEIVE THE PRODUCTS, SUPPLIES, MATERIALS, AND SERVICES

As consideration, the above-named Customer agrees: THIS CONTRACT MUST BE SIGNED BEFORE WORK IS COMMENCED

- a) To pay Halliburton in accord with the rates and terms stated in Halliburton's current price list. Invoices are 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 attorneys 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.
 - b) To defend, indemnify, release and hold harmless Halliburton, its divisions, subsidiaries, parent and affiliated companies and the officers, directors, employees, agents and servants of all of them from and against any claims, liability, expenses, attorneys fees, and costs of defense to the extent permitted by law for:
 - 1. Damage to property owned by, in the possession of, or leased by Customer, and/or the well owner (if different from Customer), including, but not limited to, surface and subsurface damage. The term "well owner" shall include working and royalty interest owners.
 - 2. Reservoir, formation, or well loss or damage, subsurface trespass or any action in the nature thereof
 - 3. Personal injury or death or property damage (including, but not limited to, damage to the reservoir, formation or well), or any damages whatsoever, growing out of or in any way connected with or resulting from pollution, subsurface pressure, losing control of the well and/or a well blowout or the use of radioactive material.
- The defense, indemnity, release and hold harmless obligations of Customer provided for in this Section b) and Section c) below shall apply to claims or liability even if caused or contributed to by Halliburton's negligence, strict liability, or the unseaworthiness of any vessel owned, operated, or furnished by Halliburton or any defect in the data, products, supplies, materials, or equipment of Halliburton whether in the preparation, design, manufacture, distribution, or marketing thereof, or from a failure to warn any person of such defect. Such defense, indemnity, release and hold harmless obligations of Customer shall not apply where the claims or liability are caused by the gross negligence or willful misconduct of Halliburton. The term "Halliburton" as used in said Sections b) and c) shall mean Halliburton, its divisions, subsidiaries, parent and affiliated companies, and the officers, directors, employees, agents and servants of all of them.
- c) That because of the uncertainty of variable well conditions and the necessity of relying on facts and supporting services furnished by others, Halliburton is unable to guarantee the effectiveness of the products, supplies or materials, nor the results of any treatment or service, nor the accuracy of any chart interpretation, research analysis, job recommendation or other data furnished by Halliburton. Halliburton personnel will use their best efforts in gathering such information and their best judgment in interpreting it, but Customer agrees that Halliburton shall not be liable for and Customer shall indemnify Halliburton against any damages arising from the use of such information.
 - d) That Halliburton warrants only title to the products, supplies and materials and that the same are free from defects in workmanship and materials. THERE ARE NO WARRANTIES, EXPRESS OR IMPLIED, OF MERCHANTABILITY, FITNESS OR OTHERWISE WHICH EXTEND BEYOND THOSE STATED IN THE IMMEDIATELY PRECEDING SENTENCE. Halliburton's liability and Customer's exclusive remedy in any cause of action (whether in contract, tort, breach of warranty or otherwise) arising out of the sale or use of any products, supplies or materials is expressly limited to the replacement of such products, supplies or materials on their return to Halliburton or, at Halliburton's option, to the allowance to the Customer of credit for the cost of such items. In no event shall Halliburton be liable for special, incidental, indirect, punitive or consequential damages.
 - e) That Customer shall, at its risk and expense, attempt to recover any Halliburton equipment, tools or instruments which are lost in the well and if such equipment, tools or instruments are not recovered, Customer shall pay Halliburton its replacement cost unless such loss is due to the sole negligence of Halliburton. If Halliburton equipment, tools or instruments are damaged in the well, Customer shall pay Halliburton the lesser of its replacement cost or the cost of repairs unless such damage is caused by the sole negligence of Halliburton. In the case of equipment, tools or instruments for marine operations, Customer shall, in addition to the foregoing, be fully responsible for loss of or damage to any of Halliburton's equipment, tools or instruments which occurs at any time after delivery to Customer at the landing until returned to the landing, unless such loss or damage is caused by the sole negligence of Halliburton.
 - f) To waive the provisions of the Deceptive Trade Practices - Consumer Protection Act, to the extent permitted by law.
 - g) That this contract shall be governed by the law of the state where services are performed or materials are furnished.
 - h) That Halliburton shall not be bound by any changes or modifications in this contract, except where such change or modification is made in writing by a duly authorized executive officer of Halliburton.

I HAVE READ AND UNDERSTAND THIS CONTRACT AND REPRESENT THAT I AM AUTHORIZED TO SIGN THE SAME AS CUSTOMER'S AGENT.

SIGNED W. C. Craig CUSTOMER

SEP 14 1990 DATE 7-17-90

We certify that the Fair Labor Standards Act of 1938, as amended, has been complied with in the production of goods and/or with respect to services furnished under this contract.

TIME 11:00 A.M./P.M.

CUSTOMER

JOB LOG

WELL NO. 113 LEASE FOUR 15 TICKET NO. 770315
 CUSTOMER LEIBACK OIL COMPANY PAGE NO. 1
 JOB TYPE 4 1/2 Long STRING DATE 7-17-90

FORM 2013 R-2

CHART NO.	TIME	RATE (EPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1200							CALLS OUT
	1600							TIME ADJUSTED
	1600							ON LOCATION
	1800							WAITING ON CASING
	1815							CASING ON LOCATION UNBOUND
	1825							CEMENT ON LOCATION
	1845							FINISH LAYING DOWN DRILL PIPE SET UP THROCKS.
	1930							CASING STARTED
	1930							BUN FLATING EQUIP
	2110							CASING IN HOLE
	2110							HOOK UP TO CIRCULATE BIG PUMP
	2120							START CIRCULATING
	2135							FINISH CIRCULATING
	2135							HOOK UP TO CEMENT MAT HOLE
	2137	2						MIX CEMENT
	2140		6		2	150		pump unit in MAT hole
	2143				2			Hooks up to cement casing
	2145	5			2	150		START CEMENT PUMP HOLE
	2150		23		2	100		FINISH CEMENT & PUMPING UNIT
	2151				2			WASH UP
	2152				2			RELEASE plug
	2154	5			2	50		START Displacing plug
	2205		45		2	300		FINISH Displacing plug & sand
	2205				2	700		Pressure TO 700 psi
	2206				2	0		Release press, check float
	2207				2	0		Float tubing
	2207				2			JOB completed
								Thank you for calling Halliburton
								UNIT # 7193 - P
								UNIT # 5302 - P

CUSTOMER

WELL DATA

ELD. _____ SEC. 18 TWP. 21 RNG. 4 COUNTY. Farmington STATE KS

FORMATION NAME _____ TYPE _____

FORMATION THICKNESS _____ FROM _____ TO _____

VITAL PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFO _____

PRESENT PROD: OIL _____ BPD. WATER _____ BPD. GAS _____ MCFO _____

COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____

PACKER TYPE _____ SET AT _____

BOTTOM HOLE TEMP. _____ PRESSURE _____

LOG DATA _____ TOTAL DEPTH _____

JOB DATA

CALLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>7-17-90</u> TIME <u>12:00</u>	DATE <u>7-17-90</u> TIME <u>11:00</u>	DATE <u>7-17-90</u> TIME <u>2:35</u>	DATE <u>7-17-90</u> TIME <u>2:05</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>S. Davis</u>	<u>21525</u>	<u>Liberal KS</u>
<u>R. CRIST</u>	<u>15024</u>	
<u>D. Phillips</u>	<u>07053</u>	<u>KS</u>
<u>60974</u>	<u>1546-5012</u>	<u>Liberal KS</u>

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
SOAT COLLAR		
SOAT SHOE		
GUIDE SHOE <u>R. 4</u>	<u>4 1/2</u>	<u>1</u>
CENTRALIZERS <u>1-4</u>	<u>5</u>	<u>H</u>
BOTTOM PLUG		<u>"</u>
TOP PLUG <u>1-2</u>	<u>1</u>	<u>W</u>
EAD		<u>W</u>
PACKER <u>ROCKET</u>	<u>1</u>	<u>W</u>
OTHER <u>1-1/2" T. HILL</u>	<u>1</u>	

MATERIALS

HEAT FLUID _____ DENSITY _____ LB/GAL-API

SPL. FLUID _____ DENSITY _____ LB/GAL-API

ROP. TYPE _____ SIZE _____ LB.

ROP. TYPE _____ SIZE _____ LB.

CID TYPE _____ GAL. _____ %

CID TYPE _____ GAL. _____ %

CID TYPE _____ GAL. _____ %

DEFRACTION TYPE _____ GAL. _____ IN.

DEFRACTION AGENT TYPE _____ GAL. _____ IN.

FLUID LOSS ADD. TYPE _____ GAL-LB. _____ IN.

CELLING AGENT TYPE _____ GAL-LB. _____ IN.

INC. RED. AGENT TYPE _____ GAL-LB. _____ IN.

SEALER TYPE _____ GAL-LB. _____ IN.

LOCKING AGENT TYPE _____ GAL-LB. _____

DEFRACTION BALLS TYPE _____ QTY. _____

OTHER _____

OTHER _____

DEPARTMENT Construction

DESCRIPTION OF JOB 4 1/2" Lining STRINGS

JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN.

CUSTOMER REPRESENTATIVE X W.C. Craig

HALLIBURTON OPERATOR Liberal KS COPIES REQUESTED _____

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
	<u>43</u>	<u>5/1000</u>	<u>H</u>	<u>B</u>	<u>1000 sack 12 1/2" 6.6 14% of B-2</u>		

PRESSURES IN PSI

SUMMARY

VOLUMES

IRCULATING _____ DISPLACEMENT _____ PRESLUSH: BBL-GAL. _____ TYPE _____

REAKDOWN _____ MAXIMUM _____ LOAD & BKDN: BBL-GAL. _____ PAD: BBL-GAL. _____

VERAGE _____ FRACTURE GRADIENT _____ TREATMENT: BBL-GAL. _____ DISPL: (BBL-GAL) 43

MUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____ CEMENT SLURRY: (BBL-GAL) 23

HYDRAULIC HORSEPOWER _____ TOTAL VOLUME: (BBL-GAL) 69

ORDERED _____ AVAILABLE _____ USED _____ REMARKS _____

AVERAGE RATES IN BPM _____

REATING _____ DISPL. _____ OVERALL _____

CEMENT LEFT IN PIPE _____

FEET 11.54 REASON 1000

SEP 14 1990

CUSTOMER: LIBERAL KS
 DATE: 7-17-90
 JOB TYPE: 4 1/2" Lining STRINGS