

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

ORIGINAL

Operator: License # 6040

Name: BANKOFF OIL COMPANY

Address P.O. Box 16418

City/State/Zip Wichita, Kansas 67216

Purchaser: _____

Operator Contact Person: J.E. Jespersen

Phone (316) 262-2784

Contractor: Name: Discovery Drilling, Inc.

License: 31548

Wellsite Geologist: J.E. Jespersen

Designate Type of Completion
 New Well Re-Entry Workover

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

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

Operator: Donald Slawson

Well Name: Bondurant B #1

Comp. Date 12/30/67 Old Total Depth 4380

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

9/26/97 9/29/97 9/29/97

9/26/97 Date of REENTRY 9/29/97 Date Reached TD 9/29/97 Completion Date

API NO. 15- 15-20,100-0001

County Ness

C - SE - NE Sec. 30 Twp. 20s Rge. 21w ^EW

3300 Feet from S/N (circle one) Line of Section

660 Feet from E/W (circle one) Line of Section

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

Lease Name Bondurant (OWWO) Well # 1

Field Name Unknown

Producing Formation None

Elevation: Ground 2230 KB 2238

Total Depth 1565 PBT

Amount of Surface Pipe Set and Cemented at 308' In 67' Foot

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 UNSUCCESSFUL REENTRY
(Data must be collected from the Reserve Pit) JR 4-16-98

Chloride content 2,000 ppm Fluid volume 200 bbl:

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name 11597

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.

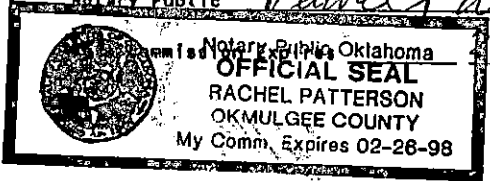
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature Bob Skowlski

Title Office manager Date 11-3-97

Subscribed and sworn to before me this 3 day of November, 19 97.

Notary Public Rachel Patterson



-26-98

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Geologist Report Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other

(Specify)

Operator Name BANKOFF OIL COMPANY

Lease Name Bondurant (OWWO) Well # 1

Sec. 30 Twp. 20S Rge. 21W
 East
 West

County _____

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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

Log Formation (Top), Depth and Datum Sample

Name Top Datum

List All E.Logs Run:

CASING RECORD <input type="checkbox"/> New <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

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Date of First, Resumed Production, SWD or In]		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 Production Interval

Open Hole Perf. Dually Comp. Commingled

Other (Specify) _____

ALLIED CEMENTING CO., INC.

8321

Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

ORIGINAL

SERVICE POINT:

Neosho City

DATE <u>9-29-97</u>	SEC. <u>30</u>	TWP. <u>20</u>	RANGE <u>21</u>	CALLED OUT <u>1:30 pm</u>	ON LOCATION <u>2:45 pm</u>	JOB START <u>3:40 pm</u>	JOB FINISH <u>6:30 pm</u>
LEASE <u>Bandura</u> WELL # <u>00000</u>		LOCATION <u>Bayline 11s 1E 1/2s W.S.</u>			COUNTY <u>Neosho</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD <input type="radio"/> NEW (Circle one)							

CONTRACTOR Discovery Dug #1
 TYPE OF JOB Rotary Plug
 HOLE SIZE 7 7/8 T.D. 1565
 CASING SIZE _____ DEPTH _____
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT _____
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT _____

OWNER Same
 CEMENT AMOUNT ORDERED
205 6 3/4 6 3/4 1/4 7/8 seal

COMMON	<u>123</u>	@	<u>6.35</u>	<u>781.05</u>
POZMIX	<u>82</u>	@	<u>3.25</u>	<u>266.50</u>
GEL	<u>11</u>	@	<u>9.50</u>	<u>104.50</u>
CHLORIDE		@		
<u>7/8 seal</u>	<u>51</u>	@	<u>1.15</u>	<u>58.65</u>
		@		
		@		
		@		
		@		
HANDLING	<u>205</u>	@	<u>1.05</u>	<u>215.25</u>
MILEAGE	<u>24</u>			<u>196.80</u>
TOTAL				<u>\$ 1622.7</u>

EQUIPMENT

PUMP TRUCK CEMENTER J. Weighman
 # 224 HELPER B. Norton
 BULK TRUCK
 # 116 DRIVER D. Walls
 BULK TRUCK
 # _____ DRIVER _____

REMARKS:

SERVICE

mic 50 x e 1450
80 x e 650
40 x e 300
10 x e 40
10 x m H
15 x R H

DEPTH OF JOB 1450
 PUMP TRUCK CHARGE 470.00
 EXTRA FOOTAGE @ _____
 MILEAGE 24 @ 2.85 68.40
 PLUG top woods @ 23.00 23.00
DRY HOLE @ _____
 @ _____

TOTAL \$ 561.4

CHARGE TO: Bankoff Oil Co
 STREET PO Box 16418
 CITY Wichita STATE Ks ZIP 67216

FLOAT EQUIPMENT

	@		
	@		
	@		
	@		
	@		

TOTAL _____

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.

TAX -0-
 TOTAL CHARGE \$ 2184.15
 DISCOUNT \$ 327.62 IF PAID IN 30 DAYS

SIGNATURE Tom ALM

Tom ALM
 PRINTED NAME

Net \$ 1856.53