

AFFIDAVIT OF COMPLETION FORM

ACO-1

This form shall be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry SWD, OWWO, injection. Type and 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 L. D. Davis API NO. 009-22,574

ADDRESS Box 324 COUNTY Barton

Great Bend, Kansas 67530 FIELD _____

**CONTACT PERSON _____ PROD. FORMATION _____

PHONE _____ LEASE Kasselman #1

PURCHASER _____ WELL NO. 1

ADDRESS _____ WELL LOCATION SW SW SW

DRILLING Mustang Drilling & Exploration, Inc. 330 Ft. from south Line and

CONTRACTOR 330 Ft. from west Line of

ADDRESS P.O. Drawer 1609 the SW/4 SEC. 31 TWP. 20S RGE. 11W

Great Bend, Kansas 67530

PLUGGING Mustang Drilling & Exploration, Inc.

CONTRACTOR _____

ADDRESS P.O. Drawer 1609

Great Bend, Kansas 67530

TOTAL DEPTH _____ PBT _____

SPUD DATE 12-11-81 DATE COMPLETED 4-5-92

ELEV: GR 1816 DF 1818 KB 1821

DRILLED WITH (~~KKKK~~) (ROTARY) (~~KKK~~) TOOLS (New) / (Used) casing.

CASING RECORD

Report of all strings set — surface, intermediate, production, etc.

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	23#	271'	50/50 Poz mix	225	3% cc; 2% gel

LINER RECORD

PERFORATION RECORD

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

STATE RECEIVED
KANSAS CORPORATION COMMISSION
APR 12

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated

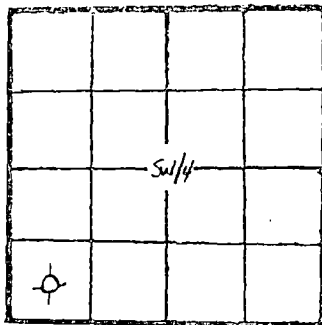
CONSERVATION DIVISION
Wichita, Kansas

Date of first production _____ Producing method (flowing, pumping, gas lift, etc.) _____ Gravity _____

RATE OF PRODUCTION PER 24 HOURS
Oil _____ Gas _____ Water _____ Gas-oil ratio _____
bbls. MCF % bbls. CFPB

Disposition of gas (vented, used on lease or sold) _____ Perforations _____

*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.



WELL PLAT

KCC
KGS
MISC _____
(Office Use)

Name of lowest fresh water producing stratum sand Depth 125

Estimated height of cement behind Surface Pipe circulate

DV USED? _____

WELL LOG

Formation Description, Contents, etc.	Top	Bottom	Name	Depth
Sand, Red bed	0	271	Heebner	3015
Shale	271	360	Toronto	3033
Shale, Red bed	360	1440	Douglas	3045
Shale	1440	1822	Brown Lime	3148
Lime, Shale	1822	2110	Lansing KC	3159
Shale, Lime	2110	2805	Simpson	3394
Lime	2805	2970	Arbuckle	3417
Shale, Lime	2970	3015	RTD	3434
Shale	3015	3019		
Lime	3019	3045		
Shale	3045	3148		
Lime, Shale	3148	3159		
Lime	3159	3394		
Shale, Sand	3394	3417		
Dolomite	3417	3434		
RTD		3434		
DST #1 30/30/30/30 3208-48 rec. 15' mud w/rainbow of oil ISIP 700 FSIP 690 IF 20-20 FF 30-30				
DST #2 30/45/60/45 3370-3410 TOB 3 hrs. ISIP 620 FSIP 490 IF 20-20 FF 40-40 HYD 1920 90' gassy oil spec mud 90' gassy wtry mud 120' gas in pipe				
DST #3 3417-3424 TOB 2 hrs. rec. 15' mud w/trace of oil				
DST #4 3424-3434				

AFFIDAVIT

STATE OF Kansas, COUNTY OF Barton SS,

L.D. Davis OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH,

DEPOSES THAT HE IS XXXXX (FOR)(OF) XXXXX

OPERATOR OF THE Kasselman LEASE, AND IS DULY AUTHORIZED TO MAKE

THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 1 ON

SAID LEASE HAS BEEN COMPLETED AS OF THE 5th DAY OF April, 1982, AND THAT

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

FURTHER AFFIANT SAITH NOT.

(s) L.D. Davis
L. D. Davis

SUBSCRIBED AND SWORN BEFORE ME THIS 5th DAY OF April 1982

Bessie M. DeWerff
NOTARY PUBLIC
Bessie M. DeWerff

MY COMMISSION EXPIRES: 5-20-85

