

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

API NO. 15- 007-20668-00-01

County Barber
130' North- SW - SW - NW Sec. 4 Twp. 31 Rge. 12 X W

Operator: License # 4233

Name: Precision Petroleum Corp.

Address P. O. 253

City/State/Zip Wichita, KS 67201

Purchaser: N/A

Operator Contact Person: Gail D. Melton

Phone (316) 744-1210

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: N/A

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:

Operator: Raymond Oil Co.

Well Name: Rule #1

Comp. Date 09/30/78 Old Total Depth 3885'

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

07/07/94 07/08/94 09/12/94
Spud Date Date Reached TD Completion Date

2180' Feet from S/M (circle one) Line of Section

330' 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 Olson Well # 1-4

Field Name

Producing Formation Douglas

Elevation: Ground 1801' KB 1810'

Total Depth 3890' PBDT 3845'

Amount of Surface Pipe Set and Cemented at 270' 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 ACT 1 DAW 7-17-95
(Data must be collected from the Reserve Pit)

Chloride content ppm Fluid volume 600 bbls

Dewatering method used Air dry pits for refilling

Location of fluid disposal or hauled offsite:

Operator Name

Lease Name License No.

Quarter Section Twp. Rng. E/W

County WICHITA, KS Docket No.

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 Gail D. Melton

Title President Date 05/15/95

Subscribed and sworn to before me this 15th day of May 19 95

Notary Public Lynne E. Haltom

Date Commission Expires 2/20/99

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 Precision Petroleum Corp. Lease Name Olson Well # 1-4
 Sec. 4 Twp. 31 Rge. 12 East West
 County Barber

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 Datums	<input 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		N/A	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
List All E.Logs Run:				
	Acoustic Cement Bond Log, Gamma Ray			

CASING RECORD <input checked="" 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
Surface		8 5/8"		270'			
Production	3890'	4 1/2"	10.5	3888'	100 standard 25 40/60 poz	125	Halad .5% 2%gel

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	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
4	Bullets from 3812'-3815'	250 gal. 10% & 250 gal. HCS w/A-2	3812'-3815'

TUBING RECORD	Size 2 3/8"	Set At 3790'	Packer At None	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. None to date	Producing Method <input checked="" 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 200 Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas: **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, submit ACO-18.) Other (Specify) _____



TICKET CONTINUATION

COPI

TICKET No. 60434

FORM 1911 R-8

CUSTOMER				WELL				DATE		PAGE	
PRECISION PETROLEUM INC				OLSON 1-4				07-08-94		2 OF 2	
PRICE REFERENCE	SECONDARY REFERENCE / PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT	DF			QTY.	U/M	QTY.	U/M	
504-308	516.00261	1				100	sk		7.24	724.00	
508-127	890.50131	1				700	1b	7	25.90	18130.00	
509-968	516.00158	1				500	1b		15	7500.00	
507-775	516.00144	1				47	1b		7.00	329.00	
504-136		1				25	sk		6.08	152.00	
<p>RECEIVED KANSAS CORPORATION COMMISSION MAY 15 1995 CONSERVATION DIVISION WICHITA, KS</p>											
LOADED ON TRUCK #50808											
EA-2-FRONT 40/60-BACK											
500-207		1				CUBIC FEET		141	1.35	190.35	
500-306		1				MILEAGE CHARGE	TOTAL WEIGHT	LOADED MILES	TON MILES		
							12,779	25	159.7375	95	151.75

ORIGINAL

CONTINUATION TOTAL

1793.4



HALLIBURTON

HALLIBURTON ENERGY SERVICES

ADDRESS: 20 Box 253
 CITY, STATE, ZIP CODE: Wichita KS 67201-253

No. 614342 - 3

PAGE 1 OF 2

FORM 1906 R-13

1. SERVICE LOCATIONS	WELL/PROJECT NO.	LEASE	COUNTY/PARISH	STATE	CITY/OFFSHORE LOCATION	DATE	OWNER
2. TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input type="checkbox"/> NO	CONTRACTOR	RIG NAME/NO.	SHIPPED VIA	DELIVERED TO	ORDER NO.	
3. WELL TYPE	WELL CATEGORY	JOB PURPOSE	WELL PERMIT NO.	WELL LOCATION			
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		UNIT PRICE		AMOUNT
		LOC	ACCT.	DF		QTY.	U/M	QTY.	U/M	
200-117		1			MILEAGE	53	mi	2.75		145.25
201-016		1			PLUG CHARGES	335	EA	1570.00		523950.00
18-315		1			PLUG FLUSH	1	EA	165		165.00
30-016		1			PLUG SW	1	EA	450		450.00
24-240		1			20' STAINLESS STEEL W/	1	EA	185.00		185.00
12A	825 701	1			GUIDE SIDE	1	EA	7300		7300.00
24A	815 19101	1			TUSSET FLUSH	1	EA	7300		7300.00
27	815 19113	1			FILL JAR	1	EA	450		450.00
40	806 60004	1			CENTRALIZER	1	EA	4500		4500.00
350	890 10802	1			WELD A	1	EA	14.50		14.50
55	806 72020	1			FASGRD CLAMPS	10	EA	1730		17300.00
60	806 71001	1			20' STAINLESS STEEL W/	1	EA	2250		2250.00

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 MAY 15 1995
 CONSERVATION DIVISION
 WICHITA, KS

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

CUSTOMER OR CUSTOMER'S AGENT SIGNATURE
X Gail D. Melton
 DATE SIGNED: 7-5-94 TIME SIGNED: 1100
 A.M. P.M.

SUB SURFACE SAFETY VALVE WAS:
 PULLED & RETURN PULLED RUN

TYPE LOCK	DEPTH	
BEAN SIZE	SPACERS	
TYPE OF EQUALIZING SUB.	CASING PRESSURE	
TUBING SIZE	TUBING PRESSURE	WELL DEPTH
TREE CONNECTION	TYPE VALVE	

SURVEY

OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?	AGREE	UN-DECIDED	DIS-AGREE
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL: 2841.10
 FROM CONTINUATION PAGE(S): 1793.4
 SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE: 4634.50

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES: The customer hereby acknowledges receipt of the materials and services listed on this ticket.

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) <u>Gail D. Melton</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) X <u>Karl D. Miller</u>	HALLIBURTON OPERATOR/ENGINEER <u>Y. M. ...</u>	EMP # <u>74220</u>	HALLIBURTON APPROVAL
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JOB LOG HAL-2013-C

CUSTOMER: Precision Prod Inc. WELL NO: 1-4 LEASE: Olson JOB TYPE: 4 1/2 Prod. TICKET NO: 614342

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
								Called out on noc ORIGINAL
	1700							Break Circ
	1741	6	-				300	Start Mud Flush
	1744	6	12	1			310	Finish Mud Flush
	1748	5	33					Plug RATHOLE
	1749	5	226					Plug Mousehole
	1756	6 1/2	-				300	Start Mixing EA-2
	1803	4	226				100	Finish Mixing EA-2
	1804		5					Close lines
	1804		-					Release Aug
	1806	8	-				-	Start Disp
	1815	3	6116				1200	Aug Down Release -HELD

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 KANSAS CORPORATION COMMISSION

MAY 15 1995

 CONSERVATION DIVISION
 WICHITA, KS

Job Complete

 THANK YOU
 JAMES
 TODD
 MAEHL



JOB SUMMARY

HALLIBURTON DIVISION
HALLIBURTON LOCATION

WELL DATA
PROTH KS

BILLED ON TICKET NO. 6014342

FIELD _____ SEC 4 TWP. 31 RNG. 12W COUNTY BARBOUR STATE KS

FORMATION NAME _____ TYPE _____
 FORMATION THICKNESS _____ FROM _____ TO _____
 INITIAL PROD. OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____
 PRESENT PROD. OIL _____ BPD. WATER _____ BPD. GAS _____ MCFD _____
 COMPLETION DATE _____ MUD TYPE _____ MUD WT. _____
 PACKER TYPE _____ SET AT _____
 BOTTOM HOLE TEMP. _____ PRESSURE _____
 MISC. DATA _____ TOTAL DEPTH _____

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING			4 1/2	6	3887	
LINER						
TUBING						
OPEN HOLE				3887	3890	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						ORIGINAL

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY	MAKE
FLOAT COLLAR		
FLOAT SHOE		
GUIDE SHOE		
CENTRALIZERS	3	Howco
BOTTOM PLUG	1	
TOP PLUG	1	
HEAD	1	
PACKER	1	
OTHER		

JOB DATA

CALLLED OUT	ON LOCATION	JOB STARTED	JOB COMPLETED
DATE <u>7-6</u> TIME <u>0730</u>	DATE <u>7-8</u> TIME <u>1000</u>	DATE <u>7-8</u> TIME <u>1741</u>	DATE <u>7-8</u> TIME <u>1915</u>

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
<u>4271 M GULF</u>	<u>40037</u> <u>PIU</u>	<u>25355</u>
<u>61627 SUBA</u>	<u>4400</u> <u>RCM</u>	
<u>6709 FLOWLINE</u>	<u>50808</u> <u>BULK</u>	

MATERIALS

TREAT FLUID _____ DENSITY _____ LB/GAL API _____
 DISPL FLUID _____ DENSITY _____ LB/GAL API _____
 PROP. TYPE _____ SIZE _____ LB _____
 PROP. TYPE _____ SIZE _____ LB _____
 ACID TYPE _____ GAL _____ % _____
 ACID TYPE _____ GAL _____ % _____
 ACID TYPE _____ GAL _____ % _____
 SURFACTANT TYPE _____ GAL _____ IN _____
 NE AGENT TYPE _____ GAL _____ IN _____
 FLUID LOSS ADD. TYPE _____ GAL-LB _____ IN _____
 GELLING AGENT TYPE _____ GAL-LB _____ IN _____
 TRIC RED AGENT TYPE _____ GAL-LB _____ IN _____
 BREAKER TYPE _____ GAL-LB _____ IN _____
 LOCKING AGENT TYPE _____ GAL-LB _____ IN _____
 PERFPAC BALLS TYPE _____ GAL-LB _____ IN _____
 OTHER _____ GAL-LB _____ IN _____
 OTHER _____ GAL-LB _____ IN _____

DEPARTMENT CRIT
 DESCRIPTION OF JOB SET 3887 4 1/2" PROD
 JOB DONE THRU: TUBING CASING ANNULUS TBG/ANN
 CUSTOMER REPRESENTATIVE X [Signature]
 HALLIBURTON OPERATOR [Signature] COPIES REQUESTED _____

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 CONSERVATION DIVISION
 WICHITA KS

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU FT/SK	MIXED LBS/GAL
	100	SLD	EA-2	15	7% CALCEA 10% / 10% 22 1/2 1/2 1/2	1.27	15.6
	75	40/60	40/60	3	7% GEL	1.27	14.3

SUMMARY

PRESLUSH: BBL-GAL 12 TYPE MUD FLUSH
 LOAD & BKDN: BBL-GAL _____ PAD: BBL-GAL _____
 TREATMENT: BBL-GAL _____ DISPL: BBL-GAL 416
 CEMENT SLURRY: BBL-GAL 3761 565
 TOTAL VOLUME: BBL-GAL _____

PRESSURES IN PSI

CIRCULATING _____ DISPLACEMENT _____
 BREAKDOWN _____ MAXIMUM _____
 AVERAGE _____ FRACTURE GRADIENT _____
 SHUT-IN: INSTANT _____ 5-MIN _____ 15-MIN _____
 HYDRAULIC HORSEPOWER _____
 ORDERED _____ AVAILABLE _____ USED _____
 AVERAGE RATES IN BPM _____
 CREATING _____ DISPL _____ OVERALL _____
 CEMENT LEFT IN PIPE _____
 SET 43 REASON _____

REMARKS

CUSTOMER _____
 LEASE _____
 WELL NO. _____
 JOB TYPE _____
 DATE _____