

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 Redwin Corporation

API NO. 15-119-20538 00-00

ADDRESS Box 1634

COUNTY Meade

Liberal, Kansas 67901

FIELD _____

**CONTACT PERSON Harold K. Frauli

PROD. FORMATION _____

PHONE 316-624-4214

LEASE ADAMS

PURCHASER _____

WELL NO. 1

ADDRESS _____

WELL LOCATION SE NW SE

DRILLING Prairie Drilling Company

1650 Ft. from South Line and

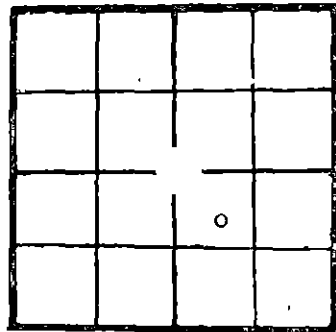
CONTRACTOR Meade, Kansas

1650 Ft. from East Line of

ADDRESS _____

the SE/4 SEC. 1 TWP. 35S RGE. 29W

PLUGGING Halliburton Services



WELL PLAT

CONTRACTOR Liberal, Kansas

KCC

ADDRESS _____

KGS

TOTAL DEPTH 6523' PBTD _____

MISC _____

SPUD DATE 11-29-81 DATE COMPLETED 12-21-81

(Office Use)

ELEV: GR 2411' DF _____ KB 2423'

DRILLED WITH (CABLE) (ROTARY) (AIR) 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	Socks	Type and percent additives
SURFACE	12 1/4"	8 5/8"	24#	1512'	light-weight	600	
					class H	200	3%cc

LINER RECORD

PERFORATION RECORD

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

TUBING RECORD

Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used

RECEIVED
STATE CORPORATION COMMISSION
1-8-82
JAN - 8 1982
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.	bbls.	MCF	%

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.

Estimated height of cement behind Surface Pipe - 0 -.

DV USED? no

WELL LOG

Formation Description, Contents, etc.	Top	Bottom	Name	Depth
COUNCIL GROVE	2990			
MARMATON	4944			
MORROW	5885			
CHESTER	6012			
ST. LOUIS	6376			

AFFIDAVIT

STATE OF KANSAS, COUNTY OF SEWARD SS, Jimmy Lee

Barlow OF LAWFUL AGE, BEING FIRST DULY SWORN UPON Her OATH,

DEPOSES THAT she IS Agent (FOR) ~~(OF)~~ Redwin Corporation

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

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

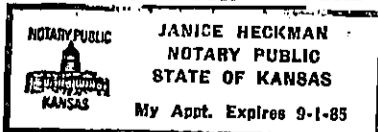
SAID LEASE HAS BEEN COMPLETED AS OF THE 24th DAY OF December, 19 81, AND THAT

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

FURTHER AFFIANT SAITH NOT.

(S) Jimmy Lee Barlow

SUBSCRIBED AND SWORN BEFORE ME THIS 6th DAY OF January 19 82



Janice Heckman
NOTARY PUBLIC

MY COMMISSION EXPIRES: