

Confidentiality Requested:

Yes No

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1

January 2018

Form must be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

New Well Re-Entry Workover

Oil WSW SWD

Gas DH EOR

OG GSW

CM (Coal Bed Methane)

Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

Deepening Re-perf. Conv. to EOR Conv. to SWD
 Plug Back Liner Conv. to GSW Conv. to Producer

Commingled Permit #: _____

Dual Completion Permit #: _____

SWD Permit #: _____

EOR Permit #: _____

GSW Permit #: _____

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No.: _____

Spot Description: _____

_____ - _____ - _____ Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

NE NW SE SW

GPS Location: Lat: _____, Long: _____
(e.g. xx.xxxxx) (e.g. -xxx.xxxxx)

Datum: NAD27 NAD83 WGS84

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Vertical Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ 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

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite:

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that 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.

Submitted Electronically

KCC Office Use ONLY

Confidentiality Requested

Date: _____

Confidential Release Date: _____

Wireline Log Received Drill Stem Tests Received

Geologist Report / Mud Logs Received

UIC Distribution

ALT I II III Approved by: _____ Date: _____

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed.

Final Radioactivity Log, Final Logs run to obtain Geophysical Data and Final Electric Logs must be emailed to kcc-well-logs@kcc.ks.gov. Digital electronic log files must be submitted in LAS version 2.0 or newer AND an image file (TIFF or PDF).

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Geologist Report / Mud Logs <input type="checkbox"/> Yes <input type="checkbox"/> No List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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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 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				

1. Did you perform a hydraulic fracturing treatment on this well? Yes No *(If No, skip questions 2 and 3)*
2. Does the volume of the total base fluid of the hydraulic fracturing treatment exceed 350,000 gallons? Yes No *(If No, skip question 3)*
3. Was the hydraulic fracturing treatment information submitted to the chemical disclosure registry? Yes No *(If No, fill out Page Three of the ACO-1)*

Date of first Production/Injection or Resumed Production/Injection:	Producing Method: <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other <i>(Explain)</i> _____			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: Top Bottom
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Shots Per Foot	Perforation Top	Perforation Bottom	Bridge Plug Type	Bridge Plug Set At	Acid, Fracture, Shot, Cementing Squeeze Record <i>(Amount and Kind of Material Used)</i>

TUBING RECORD:	Size:	Set At:	Packer At:	
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Form	ACO1 - Well Completion
Operator	Griffin, Charles N.
Well Name	SHARRON 5B
Doc ID	1464963

Tops

Name	Top	Datum
Heebner	3650	-2091
Lansing	3859	-2300
Stark	4235	-2676
B/KS	4322	-2763
Mississippi	4406	-2847
Kinderhook	4597	-3038
Viola	4703	-3144
Simpson Sand	4802	-3243



DRILL STEM TEST REPORT

Prepared For: **Charles N Griffin**

PO Box 347
Pratt, KS 67124

ATTN: Bruce Reed

Sharron #5B

33-32S-12W Barber,KS

Start Date: 2019.03.16 @ 03:40:00

End Date: 2019.03.16 @ 12:32:02

Job Ticket #: 64956 DST #: 1

Trilobite Testing, Inc

1515 Commerce Parkway Hays, KS 67601

ph: 785-625-4778 fax: 785-625-5620



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Charles N Griffin

33-32S-12W Barber, KS

PO Box 347
Pratt, KS 67124

Sharron #5B

Job Ticket: 64956

DST#: 1

ATTN: Bruce Reed

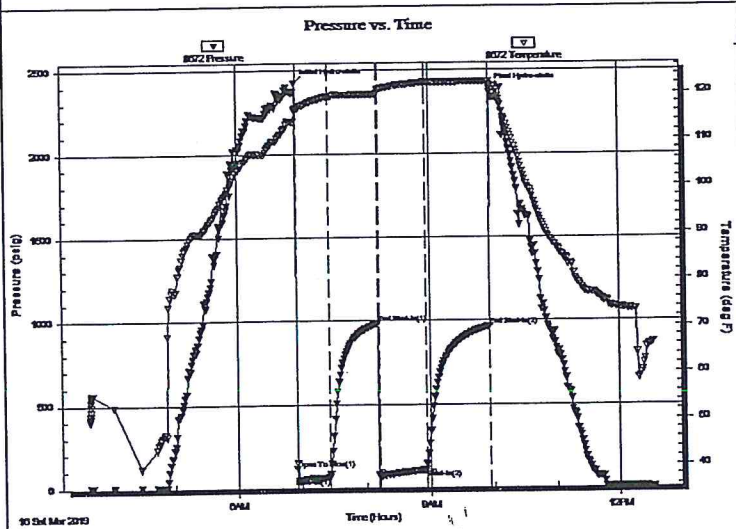
Test Start: 2019.03.16 @ 03:40:00

GENERAL INFORMATION:

Formation: **Simpson**
 Deviated: No Whipstock: ft (KB)
 Test Type: Conventional Bottom Hole (Initial)
 Time Tool Opened: 06:54:47
 Tester: Leal Cason
 Time Test Ended: 12:32:02
 Unit No: 74
 Interval: 4790.00 ft (KB) To 4814.00 ft (KB) (TVD)
 Reference Elevations: 1559.00 ft (KB)
 Total Depth: 4814.00 ft (KB) (TVD)
 1548.00 ft (CF)
 Hole Diameter: 7.88 inches Hole Condition: Good
 KB to GR/CF: 11.00 ft

Serial #: 8672 Inside
 Press@RunDepth: 105.05 psig @ 4791.00 ft (KB) Capacity: psig
 Start Date: 2019.03.16 End Date: 2019.03.16 Last Calib.: 2019.03.16
 Start Time: 03:40:01 End Time: 12:32:02 Time On Btm: 2019.03.16 @ 06:54:17
 Time Off Btm: 2019.03.16 @ 09:57:32

TEST COMMENT: IF: Strong Blow, BOB in 5 minutes, Built to 64"
 IS: No Blow Back
 FF: Strong Blow, BOB in 1 minute, Built to 118"
 FS: Blow Back Built to 1 1/2"



PRESSURE SUMMARY			
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2425.55	116.29	Initial Hydro-static
1	114.85	116.33	Open To Flow (1)
31	61.41	119.14	Shut-In(1)
77	983.60	119.54	End Shut-In(1)
78	62.33	120.44	Open To Flow (2)
122	105.05	122.13	Shut-In(2)
183	966.91	122.28	End Shut-In(2)
184	2387.72	121.67	Final Hydro-static

Recovery		
Length (ft)	Description	Volume (bbl)
0.00	2113 GIP	0.00
115.00	GOMCW 6%G 20%O 10%M 74%W	0.57
126.00	GOCM 10%G 40%O 50%M	1.77
40.00	GSOCM 20%G 10%O 70%M	0.56

Gas Rates			
	Choke (inches)	Pressure (psig)	Gas Rate (MMcf/d)



TRILOBITE TESTING, INC.

DRILL STEM TEST REPORT

Charles N Griffin

33-32S-12W Barber,KS

PO Box 347
Pratt, KS 67124

Sharron #5B

Job Ticket: 64956 DST#: 1

ATTN: Bruce Reed

Test Start: 2019.03.16 @ 03:40:00

GENERAL INFORMATION:

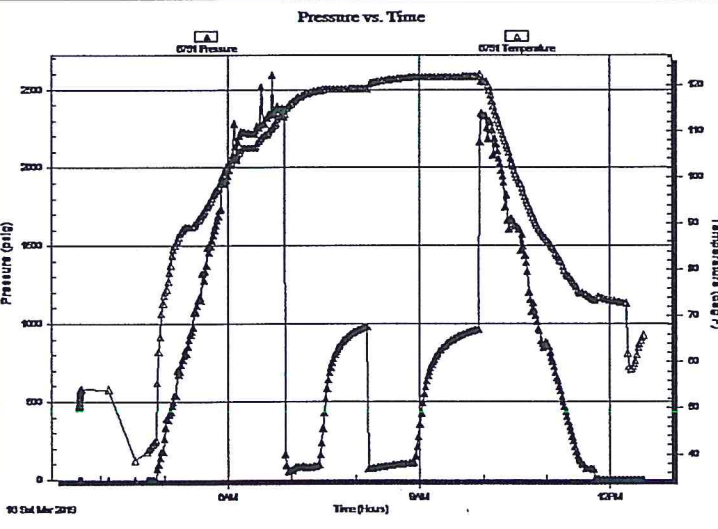
Formation: **Simpson**
 Deviated: No Whipstock: ft (KB)
 Time Tool Opened: 06:54:47
 Time Test Ended: 12:32:02
 Interval: **4790.00 ft (KB) To 4814.00 ft (KB) (TVD)**
 Total Depth: 4814.00 ft (KB) (TVD)
 Hole Diameter: 7.88 inches Hole Condition: Good
 Test Type: Conventional Bottom Hole (Initial)
 Tester: Leal Cason
 Unit No: 74
 Reference Elevations: 1559.00 ft (KB)
 1548.00 ft (CF)
 KB to GR/CF: 11.00 ft

Serial #: 6751

Outside

Press@RunDepth: psig @ 4791.00 ft (KB)
 Start Date: 2019.03.16 End Date: 2019.03.16 Capacity: psig
 Start Time: 03:40:01 End Time: 12:32:02 Last Calib.: 2019.03.16
 Time On Btm:
 Time Off Btm:

TEST COMMENT: IF: Strong Blow, BOB in 5 minutes, Built to 64"
 IS: No Blow Back
 FF: Strong Blow, BOB in 1 minute, Built to 118"
 FSI: Blow Back Built to 1 1/2"



PRESSURE SUMMARY

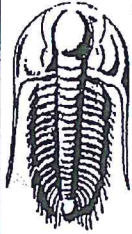
Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation

Recovery

Length (ft)	Description	Volume (bbl)
0.00	2113 GIP	0.00
115.00	GOMCW 6%G 20%O 10%M 74%W	0.57
126.00	GOCM 10%G 40%O 50%M	1.77
40.00	GSOCM 20%G 10%O 70%M	0.56

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (MMcf/d)



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

TOOL DIAGRAM

Charles N Griffin

33-32S-12W Barber,KS

PO Box 347
Pratt, KS 67124

Sharron #5B

Job Ticket: 64956

DST#: 1

ATTN: Bruce Reed

Test Start: 2019.03.16 @ 03:40:00

Tool Information

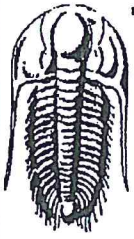
Drill Pipe:	Length: 4670.00 ft	Diameter: 3.80 inches	Volume: 65.51 bbl	Tool Weight: 2100.00 lb
Heavy Wt. Pipe:	Length: 0.00 ft	Diameter: 0.00 inches	Volume: 0.00 bbl	Weight set on Packer: 25000.00 lb
Drill Collar:	Length: 115.00 ft	Diameter: 2.25 inches	Volume: 0.57 bbl	Weight to Pull Loose: 80000.00 lb
			<u>Total Volume: 66.08 bbl</u>	Tool Chased ft
Drill Pipe Above KB:	21.00 ft			String Weight: Initial 65000.00 lb
Depth to Top Packer:	4790.00 ft			Final 66000.00 lb
Depth to Bottom Packer:	ft			
Interval between Packers:	24.00 ft			
Tool Length:	50.00 ft			
Number of Packers:	2	Diameter: 6.75 inches		

Tool Comments:

Tool Description	Length (ft)	Serial No.	Position	Depth (ft)	Accum. Lengths
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Shut In Tool	5.00			4769.00	
Hydraulic tool	5.00			4774.00	
Jars	5.00			4779.00	
Safety Joint	2.00			4781.00	
Packer	5.00			4786.00	26.00 Bottom Of Top Packer
Packer	4.00			4790.00	
Stubb	1.00			4791.00	
Recorder	0.00	8672	Inside	4791.00	
Recorder	0.00	6751	Outside	4791.00	
Perforations	20.00			4811.00	
Bullnose	3.00			4814.00	24.00 Bottom Packers & Anchor

Total Tool Length: 50.00



**TRILOBITE
TESTING, INC.**

DRILL STEM TEST REPORT

FLUID SUMMARY

Charles N Griffin

33-32S-12W Barber,KS

PO Box 347
Pratt, KS 67124

Sharron #5B

Job Ticket: 64956

DST#: 1

ATTN: Bruce Reed

Test Start: 2019.03.16 @ 03:40:00

Mud and Cushion Information

Mud Type: Gel Chem
Mud Weight: 9.00 lb/gal
Viscosity: 49.00 sec/qt
Water Loss: 7.99 in³
Resistivity: ohm.m
Salinity: 5000.00 ppm
Filter Cake: 0.02 inches

Cushion Type:
Cushion Length: ft
Cushion Volume: bbl
Gas Cushion Type:
Gas Cushion Pressure: psig

Oil API: deg API
Water Salinity: 74000 ppm

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
0.00	2113 GIP	0.000
115.00	GOMCW 6%G 20%O 10%M 74%W	0.566
126.00	GOCM 10%G 40%O 50%M	1.767
40.00	GSOCM 20%G 10%O 70%M	0.561

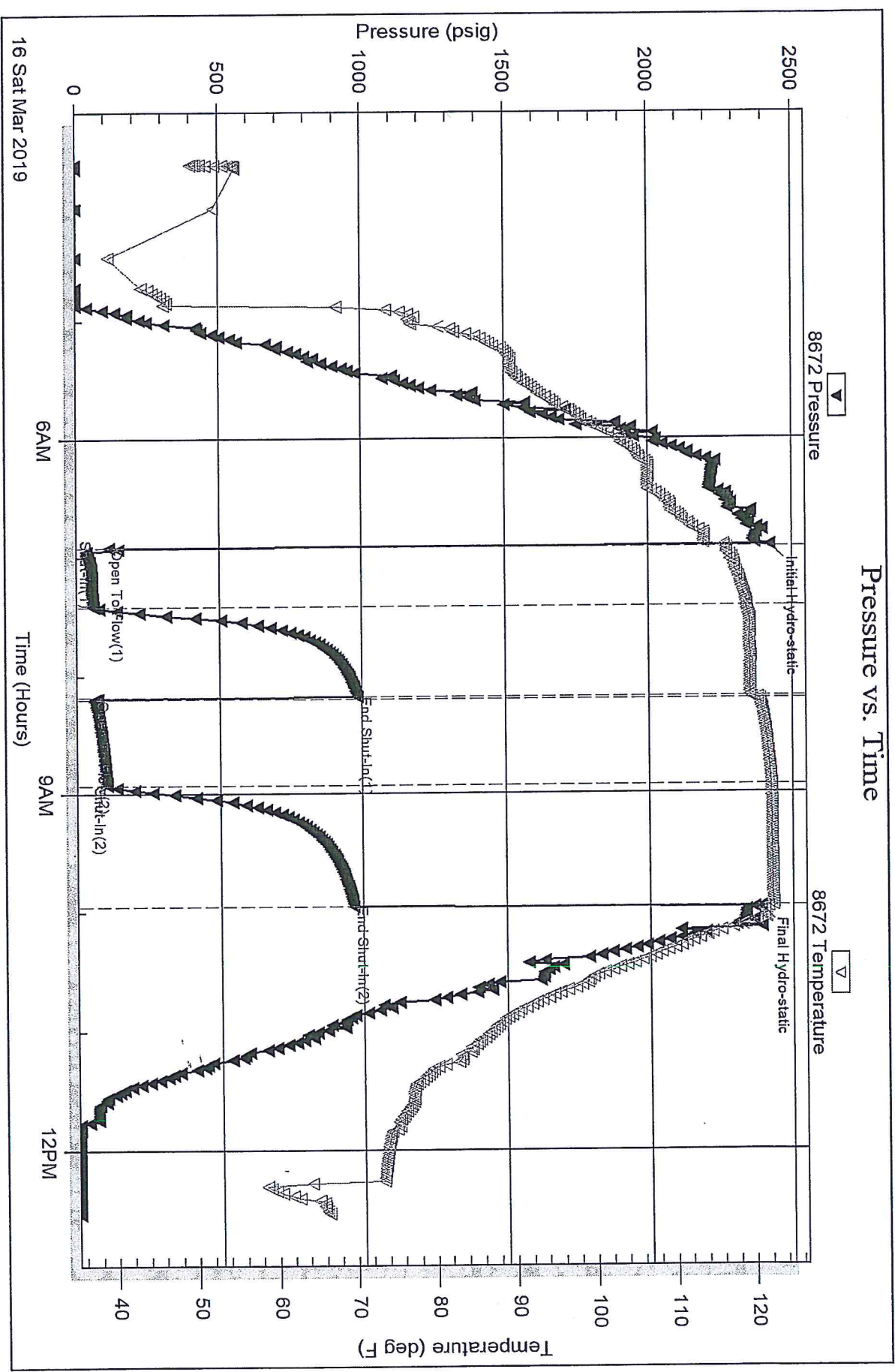
Total Length: 281.00 ft Total Volume: 2.894 bbl

Num Fluid Samples: 0 Num Gas Bombs: 0 Serial #:

Laboratory Name: Laboratory Location:

Recovery Comments: RW was .16 @ 54 degrees

Pressure vs. Time



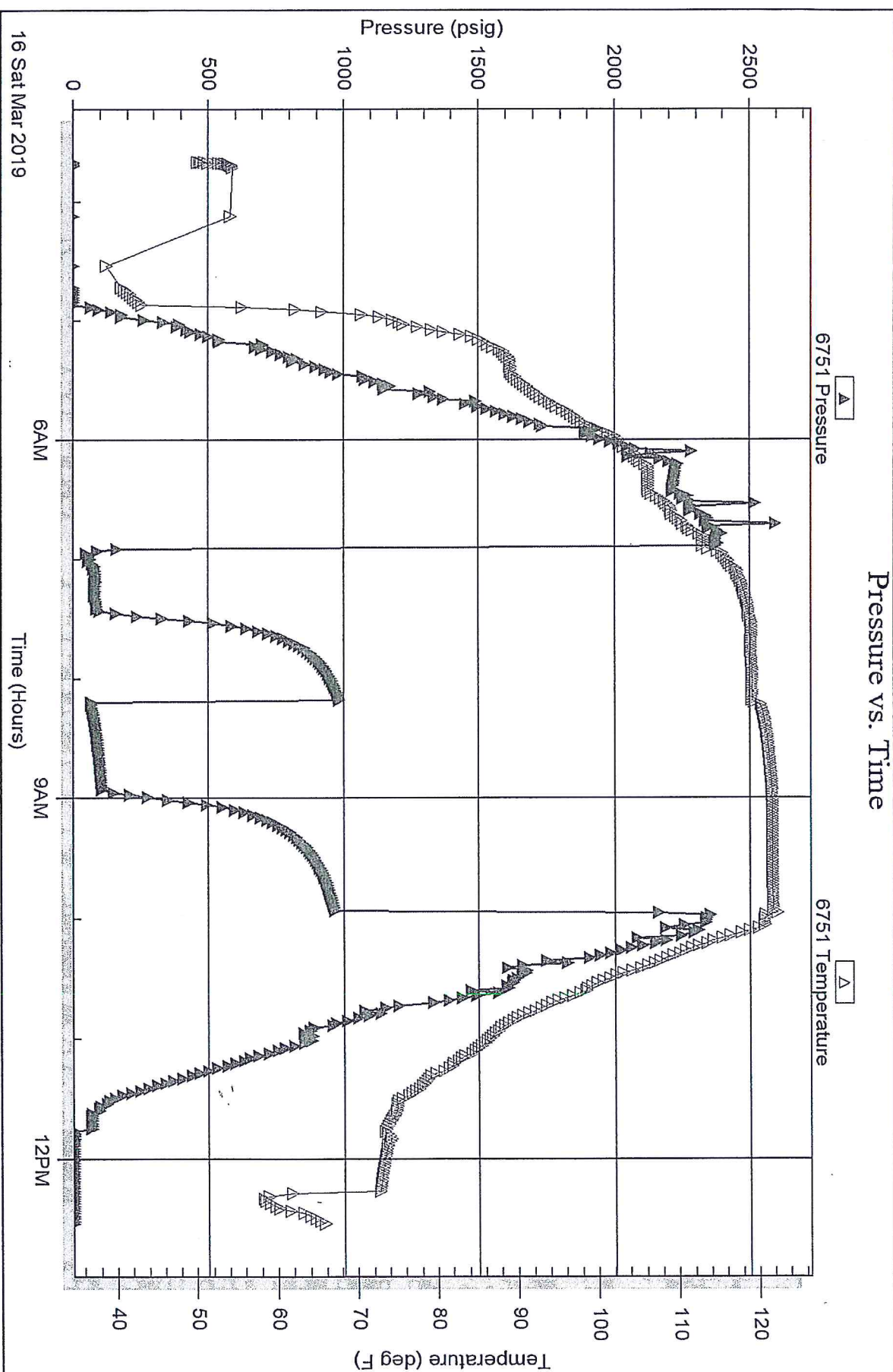
Serial #: 6751

Outside

Charles N Griffin

Sharon #5B

DST Test Number: 1



Triobite Testing, Inc

Ref. No: 64956

Printed: 2019.03.18 @ 09:59:29

QUALITY WELL SERVICE, INC.

7077

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410

Fax 620-672-3663

Rich's Cell 620-727-3409

Brady's Cell 620-727-6964

Date	3-12-19	Sec.	33	Twp.	32S	Range	12W	County	Barber	State	Ks	On Location		Finish	
Lease	SHARON		Well No.	5B		Location									
Contractor						W.W. Dole Rig 14									
Type Job						SURFACE									
Hole Size						12 1/4									
Csg.						8 7/8 23'									
Tbg. Size						Depth 269									
Tool						Depth									
Cement Left in Csg.						25									
Meas Line						Shoe Joint 25									
EQUIPMENT												Location			
												MEO Lodge, Ks S of Hwy 201			
Pumptrk												Owner			
B												P. E. Abbott H. 11 Rd 1 1/2 W S. W. into			
Bulktrk												To Quality Well Service, Inc.			
10												You are hereby requested to rent cementing equipment and furnish			
												cement and helper to assist owner or contractor to do work as listed.			
Bulktrk												Charge To			
												CHARLES Griffin			
Pickup												Street			
												City			
												State			
JOB SERVICES & REMARKS												The above was done to satisfaction and supervision of owner agent or contractor.			
Rat Hole												Cement Amount Ordered			
												225 sc Common			
Mouse Hole												2 1/2 GAL 3 1/2 CC 1/4" PS			
Centralizers												Common 225			
Baskets												Poz. Mix			
D/V or Port Collar												Gel. 4			
Run to 15 8 7/8 23' csg set d 269'												Calcium 8			
csg on Bottom Hook up to csg												Hulls			
Break Circ w/rig												Salt			
START Pumping 10 Bbls H2O												Flowseal 50.25			
START mix & Pump 225 sc												Kol-Seal			
Common 2 1/2 GAL 3 1/2 CC 1/4" PS												Mud CLR 48			
D. so 15.6 Bbls H2O												CFL-117 or CD110 CAF 38			
Close Valve on csg												Sand			
Good Circ thru JO3												Handling 237			
Circ CNT TO PIT												Mileage 30			
Thank you												FLOAT EQUIPMENT			
PLEASE CALL AGAIN												Guide Shoe			
TODD T. JAKE												Centralizer			
												Baskets			
												AFU Inserts			
												Float Shoe			
												Latch Down			
												SERVICE Sp. 1EA			
												LHW 30			
												Pumptrk Charge SURFACE			
												Mileage 60			
Signature												Tax			
												Discount			
												Total Charge			

QUALITY WELL SERVICE, INC.

7079

Federal Tax I.D. # 481187368

Home Office 30060 N. Hwy 281, Pratt, KS 67124

Mailing Address P.O. Box 468

Office 620-727-3410
Fax 620-672-3663

Rich's Cell 620-727-3409
Brady's Cell 620-727-6964

Date	Sec.	Twp.	Range	County	State	On Location	Finish
3-17-19	33	32S	12W	Baer	Ks		
Lease SHARON	Well No. B-5		Location MED LODGE, Ks S on 281 HWY to Pleasant Hill				
Contractor WW Delg Rig # 14				Owner I.S.W to CATHIE WARD 2.5 WSW into			
Type Job 4 1/2 LS.				To Quality Well Service, Inc.			
Hole Size 7 7/8				You are hereby requested to rent cementing equipment and furnish			
Csg. 4 1/2 10.5"				cement and helper to assist owner or contractor to do work as listed.			
Tbg. Size				Charge To Griffin CHARLES			
Tool				Street			
Cement Left in Csg. 21.22				City			
Meas Line				State			
Shoe Joint 21.22				The above was done to satisfaction and supervision of owner agent or contractor.			
Displace 77.20				Cement Amount Ordered 200 sc Pro C			
EQUIPMENT				2 1/2 GAL 10% SALT 5 1/2 KOSCAL			
Pumptrk 8 No.	TS			Common 200 sc			
Bulktrk 15 No.	JAKE			Poz. Mix			
Bulktrk No.				Gel. 4 sc			
Pickup No.				Calcium			
JOB SERVICES & REMARKS				Hulls			
Rat Hole 30 sc				Salt 22 sc			
Mouse Hole 20 sc				Flowseal			
Centralizers 1-2-3-4-5-6				Kol-Seal 1000"			
Baskets				Mud CLR 48 500 gal			
D/V or Port Collar				CFL-117 or CD110 CAF 38 CC-1 6 gal			
Run 119 ft 5 1/2 10.5" csg set 4875				Sand 25			
AFU Foot SHOE & LO Baffle 1st = 21.22				Handling 246			
csg on Bottom & TAG Bottom				Mileage 30			
RECALL size wire Drip Ball size 45 mins				4 1/2 FLOAT EQUIPMENT			
START Pumping Pro Flushes 5 bbl H2O				Guide Shoe			
12 Bbls MF 5 bbl H2O				Centralizer 6 EA			
START Plug R.M Holes 50s				Baskets			
START mix Pump 150 sc Down Csg				AFU Inserts			
SHUT Down Whiptrk & Release LD Plug				Float Shoe 1 EA			
START Disp 2 1/2 KCL				Latch Down 1 EA			
Lift ps. 60 out 650"				SERVICE SPN.			
Plug down 77.2 out 1100"				LMV 30			
ps. up 1500"				Pumptrk Charge Longsteing			
RELEASE: HELD 1/2 bbl BACK				Mileage 60			
Good size trip JO3, Thank You				Tax			
Please Call HELEN TOMTS-JAKE				Discount			
Signature [Signature]				Total Charge			

Company: Charles N. Griffin
 Address: PO Box 347
 Pratt, Kansas 67124

Contact Geologist: #5B Sharron
 Contact Phone Nbr: 15-007-24344
 Well Name: #5B Sharron
 Location: Section 33-32S-12W
 State: Kansas
 Pool: Medicine Lodge - Boggs
 Country: USA

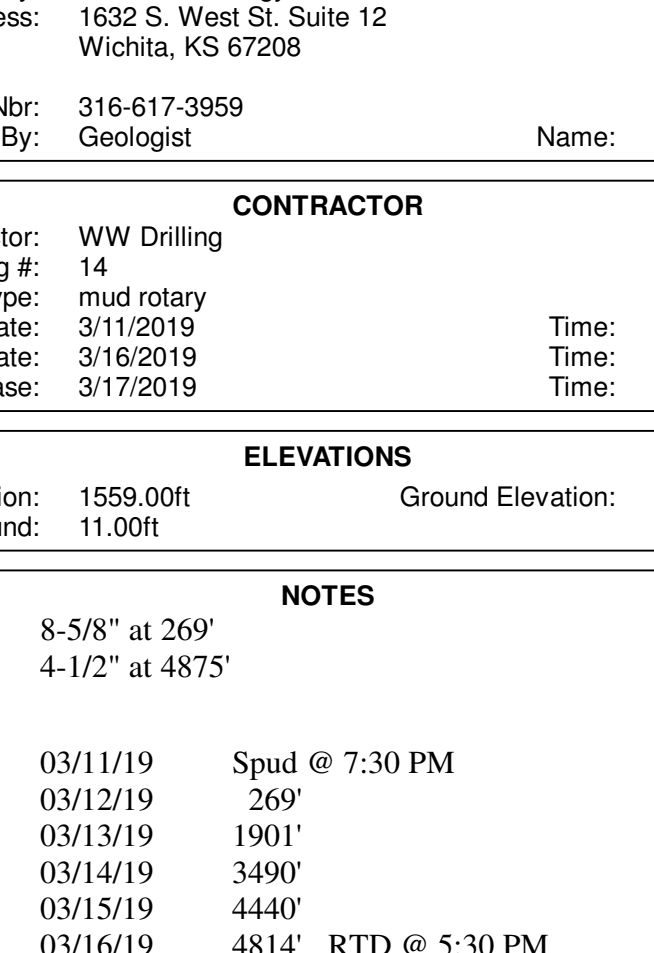
Scale 1:240 Imperial

Well Name: #5B Sharron
 Surface Location: Section 33-32S-12W
 Bottom Location: API: 15-007-24344
 License Number: 15-007-24344
 Spud Dates: 3/11/2019 Time: 7:30 PM
 Region: Barber County
 Drilling Completed: 3/16/2019 Time: 5:30 PM
 Surface Coordinates: 990' FSL / 330' FEL
 Bottom Hole Elevations: 1548.00ft
 Ground Elevation: 1559.00ft
 K.B. Elevation: 1559.00ft
 Logged Interval: 3600.00ft To: 4875.00ft
 Total Depth: 4875.00ft
 Formation: 4875'
 Drilling Fluid Type: Chemical (MudCo)

SURFACE CO-ORDINATES

Well Type: Vertical
 Longitude: 990' FSL / 330' FEL
 Latitude:

LOGGED BY



Company: TerraTech Energy Service LLC.
 Address: 1632 S. West St. Suite 12
 Wichita, KS 67208

Phone Nbr: 316-617-3959
 Logged By: Geologist Name: Bruce Reed

CONTRACTOR

Contractor: WW Drilling
 Rig #: 14
 Rig Type: mud rotary
 Spud Date: 3/11/2019 Time: 7:30 PM
 TD Date: 3/16/2019 Time: 5:30 PM
 Rig Release: 3/17/2019 Time: 6:15 PM

ELEVATIONS

K.B. Elevation: 1559.00ft Ground Elevation: 1548.00ft
 K.B. to Ground: 11.00ft

NOTES

Surface Casing: 8-5/8" at 269'
 Production Casing: 4-1/2" at 4875'

Daily Penetration:

03/11/19	Spud @ 7:30 PM
03/12/19	269'
03/13/19	1901'
03/14/19	3490'
03/15/19	4440'
03/16/19	4814' RTD @ 5:30 PM
03/17/19	4875' Rig released @ 6:15 PM

DRILL STEM TEST

DST #1 4790' to 4814'. Simpson Sand. Strong blow, BOB in 5 minutes during the initial flow period. Strong blow, BOB in 1 minute during the second flow period.
 Recovered: 2113' GIP, 40' GSOCM (20% gas, 10% oil, 70% mud), 126' GOCM (10% gas, 40% oil, 50% mud), 115' GOMCW (6% gas, 10% oil, 74% water, 10% mud).
 IFP: 30" 115-61 psi, ISIP: 45" 984 psi, FFP: 45" 62-105 psi, FSIP: 60" 967 psi

FORMATION TOPS

Formation	Sample Top	Datum	Log Top	Datum	Comparison*
Heebner	3650'	-2091	3650'	-2091	-3
Lansing	3859'	-2300	3858'	-2299	-15
Stark	4235'	-2676	4236'	-2677	-6
B/KC	4322'	-2763	4322'	-2763	-6
Mississippian	4406'	-2847	4406'	-2847	-5
Kinderhook	4597'	-3038	4598'	-3039	-6
Viola	4703'	-3144	4702'	-3143	-8
Simpson Sand	4802'	-3243	4802'	-3243	+3

*Charles N. Griffin, #3 Sharron, 2310' FSL / 990' FEL, Section 33-32S-12W
 Barber County, Kansas

ROCK TYPES

Dolprim shale, gry
 Lmslt fw7> Carbon Sh
 Ss

ACCESSORIES

MINERAL
 Sand
 Chert White
 Argillaceous/Shale

OTHER SYMBOLS

INTERVALS
 Core
 DST
 Oil Show
 Good Show
 Fair Show
 Poor Show
 Spotted or Trace
 Questionable Str
 Dead Oil Str
 Fluorescence
 Gas
 DST Int
 DST alt
 Core
 Tail pipe

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 FG, C1 - C5

