

28-9-20E

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

Operator: License # 4463
Name CALIBOQUE, KANSAS, CORP.
Address 217 S UNION
PO BOX 224
City/State/Zip MCLOUTH, KANSAS 66054

Purchaser.....

Operator Contact Person RICHARD
Phone 913-796-6475

Contractor: License # 5786
Name MCGOWIN DRILLING

Wellsite Geologist.....
Phone.....

Designate Type of Completion

New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If OWN: old well info as follows:

Operator
Well Name
Comp. Date Old Total Depth.....

WELL HISTORY

Drilling Method:

Mud Rotary Air Rotary Cable

8-4-86 8-7-86
Spud Date Date Reached TD Completion Date

1463'
Total Depth PBD

Amount of Surface Pipe Set and Cemented at 300 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
.....feet depth to.....w/.....SX cmt
Cement Company Name
Invoice #

API NO. 15-087-20,298

County.....JEFFERSON

SE NE SE Sec. 29 Twp. 9 Rge. 20E



1650 Ft North from Southeast Corner of Section
330 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name.....ZULE.....Well #.....1.....

Field Name.....

Producing Formation.....MCLOUTH SAND
API NO. 15-..

Elevation: Ground.....KB.....

Section Plat

										5280					
										4950					
										4620					
										4290					
										3960					
										3630					
										3300					
										2970					
										2640					
										2310					
										1980					
										1650					
										1320					
										990					
										660					
										330					
5280	4950	4620	4290	3960	3630	3300	2970	2640	2310	1980	1650	1320	990	660	330

WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner
(Well) Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water.....Ft North from Southeast Corner
(Stream,pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West

Other (explain).....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

Operator Name **CALIBOGUE KANSAS CORP** Lease Name **ZILLE** Well #

Sec **28** Twp **9** Rge **20** East West County **JEFFERSON**

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name Top Bottom

CASING RECORD <input type="checkbox"/> New <input checked="" 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	9 7/8	7 5/8		300	PORTLAND	106	3% CAL
PRODUCTION	6 1/2	4 1/2		1682	" " "	281	60/40 POZ
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record			
Shots Per Foot	Specify Footage of Each Interval Perforated			(Amount and Kind of Material Used)		Depth	
4	1444 - 1450						
TUBING RECORD				Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	Size	Set At	Packer at				
		1449					
Date of First Production		Producing Method					
		<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain)					