

6088

COPY *and*

FORM MUST BE TYPED

SIDE ONE

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

API NO. 15- 035-24007
County Cowley
E/2 FE NE SE SW Sec. 24 Twp. 32 Rge. 4 X E W

Operator: License # 6097

1980 Feet from (SW) (circle one) Line of Section

Name: Dick's Well Service, Inc.

330 Feet from (EW) (circle one) Line of Section

Address 110 W. 11th

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

P.O. Box 173

Lease Name Magnusson Well # 1-B

City/State/Zip Winfield, Kansas 67156

Field Name Winfield

Purchaser: Total Petroleum Inc.

Operator Contact Person: Richard Golightley

Producing Formation Layton, Hoover, Peacock

Phone (316) 221-3565/ 221-7290

Elevation: Ground 1240' est KB 2425

Contractor: Name: Glaves Drilling Co. Inc.

Total Depth 2425 PBDT _____

License: 30864

Amount of Surface Pipe Set and Cemented at 215' Feet

Wellsite Geologist: Daniel T. Johnson

Multiple Stage Cementing Collar Used? _____ Yes X No

Designate Type of Completion
X New Well _____ Re-Entry _____ Workover

If yes, show depth set _____ Feet

X Oil _____ SWD _____ S10W _____ Temp. Abd.
_____ Gas _____ ENHR _____ S16W
_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from _____

If Workover/Re-Entry: old well info as follows:

feet depth to _____ w/ _____ sx cmt.

Operator: _____

Drilling Fluid Management Plan B 152
(Data must be collected from the Reserve Pit)

Well Name: _____

Chloride content _____ ppm Fluid volume _____ bbls

Comp. Date _____ Old Total Depth _____

Dewatering method used _____

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

Location of fluid disposal if hauled offsite: _____

1-11-92 1-16-92 2-04-92
Spud Date Date Reached TD Completion Date

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 Richard Golightley
Title President Date 6-09-92

Subscribed and sworn to before me this 9th day of June, 19 92.

Notary Public Connie S. Smith

Date Commission Expires 3-06-94

K.C.C. OFFICE USE ONLY RECEIVED
STATE CORPORATION COMMISSION
F _____ Letter of Confidentiality Attached
C ✓ Wireline Log Received
C _____ Geologist Report Received
JUN 19 1992
Distribution
KCC _____ SWD/ENGPA
KGS _____ Plug _____
Wichita, Kansas

CONNIE S. SMITH
Notary Public - State
My Comm. Expires _____

SIDE TWO

Operator Name Dick's Well Service, Inc. Lease Name Magnusson Well # 1-B
 Sec. 24 Twp. 32 Rge. 4 East West
 County Cowley

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 checked="" 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	Peacock	1420	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Hoover Sand	1718	
List All E.Logs Run:		Layton Sand	2340	

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
Surface	10"	8 5/8	24.	215	Class A	85	2% gel 3% cc
Production	7 7/8"	5 1/2	15.5	2425	Class A	225	2% gel 5% salt

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
6	1420-1426 BP set @ 1550 5 1/2" bolt	500 gal 10% MCA	1460-61
5	1718-1723 BP set @ 1750 5 1/2" bolt	500 gsl 7 1/2 % MCA	
10	2340-2346	500 gal 7 1/2% MCA	

TUBING RECORD	Size 2 3/8"	Set At 2390	Packer At -----	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 2-15-92	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. 1	Gas Mcf -0-	Water Bbls. 15	Gas-Oil Ratio 38°

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____