

Form ACD-1 (7-91)

33119

SIDE TWO

Operator Name KLM EXPLORATION CO., INC.Lease Name WAGNERWell # 2HSec. 08 Twp. 10 Rge. 20☐ EastCounty JEFFERSON☐ West

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
(Attach Additional Sheets.)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☐ Yes ☒ No
(Submit Copy.)

List All E.Logs Run:

☒ Log Formation (Top), Depth and Datum ☐ Sample

| Name | Top | Datum |
|-------------------|------|-------|
| MCLOUTH SANDSTONE | 1519 | 1542 |
| SHALE | 1542 | 1568 |
| MISSISSIPPI | - | |

COPY

CASING RECORD

☐ New ☐ 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 |
|-------------------|-------------------|---------------------------|-----------------|---------------|----------------|--------------|----------------------------|
| N/A - RE-ENTRY | | | | | | | |
| | | | | | | | |
| | | | | | | | |

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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone | 1478 | PORTLAND | 40 | 2% Gel., 2% C.C. |

| 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 |
|--|---|--|-----------------------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| TUBING RECORD | | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| Size Set At Packer At | | None at this time. | |
| Date of First, Resumed Production, SMD or Inj. | | Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input checked="" type="checkbox"/> Other (Explain) | |
| This well will be used for injection. | | | |
| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. Gas-Oil Ratio Gravity |
| | -0- | -0- | -0- |

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

☒ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled NONE
☐ Other (Specify) _____