

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

API NO. 15- 091-22,7710000 *Dry Hole*

County Johnson

^{SW} SE - SW - NW Sec. 23 Twp. 14 Rge. 22E E

COPY

Star: License # 31002

²³⁴⁰
2940 FSL Feet from S/W (circle one) Line of Section

Name: Kelly Co. L.C.

480 FEL Feet from E/W (circle one) Line of Section

Address: 15547 W. 109th St.

Footages Calculated from Nearest Outside Section Corner:
111 111

City/State/Zip Lenexa, Ks. 66219

~~LUIS HANU~~ McCann C IIII I 2-WK III

Purchaser: EOTT

Field Name Gardner

Operator Contact Person: John J. McQueeney

Producing Formation None found--dry hole

Phone (913) 599-1133

Elevation: Ground 1000' KB

Contractor: Name: J & J Oil Co.

Total Depth 848" PSTD

License: 6157

Amount of Surface Pipe Set and Cemented at 20' 21' Feet

Wellsite Geologist: _____

Multiple Stage Cementing Collar Used? Yes No

Designate Type of Completion DRY HOLE
 New Well Re-Entry Workover

If yes, show depth set _____ Feet

Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from 23'

foot depth to surface w/ 5 sx cnt.

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

Drilling Fluid Management Plan DFA 4-13-98 UC
(Date must be collected from the Reserve Pit)

Operator: _____

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _____

Dewatering method used _____ RECEIVED
KANSAS CORPORATION COMMISSION

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite:
NO RESERVE PIT NOV 06 1997

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

Operator Name _____

Lease Name _____ CONSERVATION DIVISION
License No. _____ WICHITA, KS

9-2-97 9-4-97 9-4-97
Spud Date Date Reached TD Completion Date

Quarter Sec. Twp. 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-6 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 [Signature]
Title Mgr. Date 11/4/97

Subscribed and sworn to before me this 4TH day of NOVEMBER

Notary Public [Signature]

Date Commission Expires _____
JAMES G. BAKER
Notary Public - State of Kansas
My Appt. Expires 5-9-01

R.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rap NGPA
 KGS Plug Other (Specify) IS

Operator Name Kelly Co. L.C. Lease Name McCann C Well # 2-WK

Sec. 23 Twp. 14 Rge. 22E
 East
 West

County Johnson

COPY

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 or hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface during test. Attach extra s. 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 type="checkbox"/> Log	Formation (Top), Depth and Datum	<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		DRY HOLE		
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No				
List All E.Logs Run:						

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
Surface	8.75"	6.25	13.00	21'	I	5	
Casing							

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj.]	Producing Method
<u>D+A</u>	<input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Grav

Disposition of Gas: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	Production Interval _____
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