

28-14-22E

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

COPY

API NO. 15- 091-22-001
County Johnson
SE-SW-NE Sec. 28 Twp. 14 Rge. 22 NE

Operator: License # 5885
Name: Glaze Drly (Alva Glaze)
Address: 22139 S. Victory Rd.

2805 ²⁸²⁴ Feet from 3/4 (circle one) Line of Section
1816 ²²¹⁹ Feet from 0 (circle one) Line of Section

City/State/Zip Spring Hill, KS 66083

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

Purchaser: CMT

Lease Name Donovan Well # 6

Operator Contact Person: Alva Glaze

Field Name Gardener

Phone 913 592-2033

Producing Formation Bartlesville

Contractor: Name: Glaze Drly

Elevation: Ground _____ KB _____

License: 5885

Total Depth 935' PSTD _____

Wellsite Geologist: none

Amount of Surface Pipe Set and Cemented at 40 Feet

Designate Type of Completion
 New Well Re-Entry Workover

Multiple Stage Cementing Collar Used? _____ Yes No

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

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____
feet depth to 40 w/ 10 sx cm.

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

RECEIVED

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

Operator: _____

JUN 27 1994

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _____

Reversioning method used _____

Comp. Date _____ Old Total Depth _____

CONSERVATION DIVISION
Wichita, Kansas

Location of fluid disposal if hauled offsite: _____

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

Operator Name _____

8-13-88 8-16-88
Spud Date Date Reached TD Completion Date

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 Alva Glaze
Title owner Date 6/12/94

Subscribed and sworn to before me this 12th day of June 1994.

Notary Public [Signature]

Date Commission Expires 12/31/94

K.C.C. OFFICE USE ONLY			
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached	
C	<input checked="" type="checkbox"/>	Wireline Log Received	
C	<input type="checkbox"/>	Geologist Report Received	
Distribution			
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep	<input type="checkbox"/> NGPA
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other (Specify)

SIDE TWO

Operator Name Glaze, Awa

Lease Name Dmouan Well # 6

Sec. 28 Twp. 14 Rge. 22 East West

County Johnson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem test interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressure, 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.) yes

List All E.Logs Run: GAMMA RAY/NEUTRON

Log Formation (Top), Depth and Datum Sample Name Top Datum

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 1/2	7"		40	Portland	10	water
Production	6 1/4	2 7/8		935	consolidated		-

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
	10 TOTAL From 863 - 870		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	1"		NONE			
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
Nov-Dec 88						
Estimated Production Per 24 Hours	Oil 1/2 Bbls.	Gas	Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled

Production Interval 863' - 870'