

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

Water: License # 7622

Name: Richard L. Roberts

Address P.O. Box 421

City/State/Zip Olathe, KS 66051

Purchaser: EOTT

Operator Contact Person: Richard L. Roberts

Phone (913) 782-0623

Contractor Name: Hughes Drilling Co.

License: 05682

Wellbore Geologist: None

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover

☒ Oil ☐ SWD ☐ SIOW

☐ Gas ☐ ENHR ☐ SIGW

☐ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc.)

If Workover/Re-Entry, old well info as follows: JUL 15 1996

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD

☐ Plug Back ☐ PSTD

☐ Cemented ☐ Decklet No. _____

☐ Dual Completion ☐ Decklet No. _____

☐ Other (SWD or Inj?) Decklet No. _____

13/96

6/14/96

7/1/96

Date

Date Reached TD

Completion Date

API No. 15- 091-227090000

County Johnson

NE NW NW Sec. 29 Twp. 14 Rge. 22 ☒ E ☐ W

5120 5065 Feet from (S)N (circle one) Line of Section

4320 4229 Feet from (E)W (circle one) Line of Section

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

Lease Name Bacon Well # 46

Field Name Longanecker SE

Producing Formation _____

Elevation: Ground _____ KB _____

Total Depth _____ PSTD _____

Amount of Surface Pipe Set and Cemented at 22.5 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

Feet depth to 22.5 w/ 5 sx cnt.

Drilling Fluid Management Plan U.C. 12-17-97
(Date must be collected from the Reserve Pit)

less than

Chloride content 1000 ppm Fluid volume 60 bbls

Sealing method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. Rng. E/W

County _____ Decklet 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. Rules 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 L. Roberts

Title Operator Date 7/12/96

Subscribed and sworn to before me this 12th day of July 1996

Notary Public Cindy Lynn Walters

Commission Expires _____

CINDY LYNN WALTERS

NOTARY PUBLIC

STATE OF KANSAS

My App't Expires 7-13-98

K.C.C. OFFICE USE ONLY

F ☐ Letter of Confidentiality Attached
C ☒ Wireline Log Received
C ☐ Geologist Report Received

☒ KCC ☐ SUD/Rep ☐ NSPA
☐ KGS ☐ Plug ☒ Other

(Specify)

SIDE TWO

Operator Name Richard L. RobertsLease Name BaconWell # 46Sec. 29 Twp. 14 Rge. 22☒ EastCounty Johnson☐ 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
(Attach Additional Sheets.)☐ Yes ☒ No

Samples Sent to Geological Survey

☐ Yes ☒ No

Cores Taken

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

List All E.Logs Run:

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

Name	Top	Datum
Hertha	397	402
Bartlesville	856	865
TD	912	

CASING RECORD

☐ New ☒ Used

Report all strings out-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	6½"	6¼"	12	22.5	Portland	5	
	5 1/8"	2 7/8"	5	903	Portland		4 sk. Prem.
	to TD				Poz Mix	102	Gel.

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
Perforate				
Protect Casing				
Plug Back TD				
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
9 shots	860 to 866	150 Gal 15% HCl	860-866
		½ Gal 140 acid inhibitor	
		1 Gal 781 surfactant	
		¼ Gal 588 non-emulsifier	

TUBING RECORD	Size	Set At	Pecker At	Liner Run	☐ Yes ☐ No
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Date of First, Resumed Production, SMD or Inj.	Producing Method	☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)
N/A		

Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	2							

Disposition of Gas:

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

METHOD OF COMPLETION

☐ Open Hole ☒ Perf. ☐ Slightly Comp. ☐ Cemented
☐ Other (Specify) _____

Production Interval