

C

Purchaser AMOCO

Contractor: License # 5335
Name HAWLEYE DRILLING

☒ New Well	☐ Re-Entry	☐ Workover
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<u>X</u>	Oil	SWD	Temp Abd
—	Gas	Inj	Delayed Comp.
—	Dry	Other (Core, Water Supply etc.)	

If OWWO: old well info as follows:

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Operator .....
Well Name .....
Comp. Date .....Old Total Depth.....
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Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

4-4-85	4-8-85	6-13-85
Spud Date	Date Reached TD	Completion Date
940'		
Total Depth	PBTD	

Amount of Surface Pipe Set and Cemented at 20 feet
Multiple Stage Cementing Collar Used? Yes X No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from.....feet depth to.....w/.....SX cmt
Cement Company Name HALLIBURTON
Invoice # 088275-0

API NO. 15-091-21,505
County JOHNSON
SE NE SW 33 14 22 X East West

1382 Ft North from Southeast Corner of Section
2805 Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

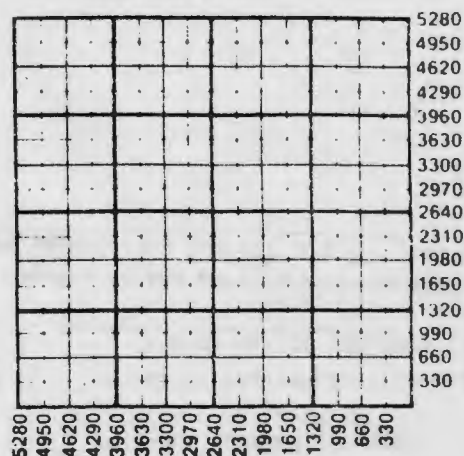
Lease Name.....NICCOM.....Well #.....2.....

Field Name.....

Producing Formation... BARTLES VILLE

Elevation: Ground.....KB.....

Section Plate



WATER SUPPLY INFORMATION

Disposition of Produced Water: _____ Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:

Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner

Sec	Twp	Rge	East	West
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Other (explain).....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

Operator Name RON-MAR ENERGY EXPL, INC Lease Name NICCOM Well # 2
Sec. 33 Twp. 14 Rge. 22 ☒ East ☐ West County JOHNSON

WELL LOG

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
Samples Sent to Geological Survey ☐ Yes ☒ No
Cores Taken ☒ Yes ☐ No

Formation Description
☒ Log ☐ Sample

Name Top Bottom

NA
KCM

	Oil	Gas	Water	Gas-Oil Ratio	Gravity
Estimated Production Per 24 Hours	5 Bbls	0 MCF	0 Bbls	CFPB	

METHOD OF COMPLETION

Production Interval

Disposition of gas: ☒ Vented ☐ Open Hole ☒ Perforation

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	9	6 1/4		20		10	
COMPLETION	5 1/8	2 7/8		906		25	

PERFORATION RECORD

Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth

Shots Per Foot	Specify Footage of Each Interval Perforated	
3	22 SHOTS PERFORATED 847.0-854.0	H ₂ O/GEL FRACTURE 40 SACKS 12/20

TUBING RECORD Size 1 1/2 Set At 906 Packer at 906 Liner Run ☐ Yes ☐ No

Date of First Production 6-13-85 Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (explain).....

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISIONWELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 9950
 Name R.N. MAR. ENERGY EXPLORATION, INC.
 Address 2210 W. 75TH
 City/State/Zip SHAWNEE MISSION, KS 66208
 Purchaser AMCO
 Operator Contact Person JOHN RONEY
CHRISTIAN L. MARTIN
 Phone (913) 362-2121
 Contractor: License # 3553
 Name HAWKEYE DRILLING CO.
 Wellsite Geologist (None)
 Phone

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover
☒ Oil ☐ SWD ☐ Temp Abd
☐ Gas ☐ Inj ☐ Delayed Comp.
☐ Dry ☐ Other (Core, Water Supply etc.)

If OWWO: old well info as follows:

Operator
 Well Name
 Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

4/3/85 4/6/85 6/13/85
 Spud Date Date Reached TD Completion Date

940'
 Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 20 feet
 Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

	Oil	Gas	Water	Gas-Oil Ratio	Gravity
Estimated Production Per 24 Hours	15 Bbls	0 MCF	0 Bbls	0 CFPB	22°

METHOD OF COMPLETION

Production Interval

Disposition of gas: ☐ Vented
☐ Sold
☒ Used on Lease

☐ Open Hole ☐ Perforation
☐ Other (Specify)

C API NO. 15-091-21,505

County JOHNSON

SE/4NE/4 SW/4 Sec. 33 Twp. 14S Rge. 22E ☒ East ☐ West

1382' Ft North from Southeast Corner of Section
2805' Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

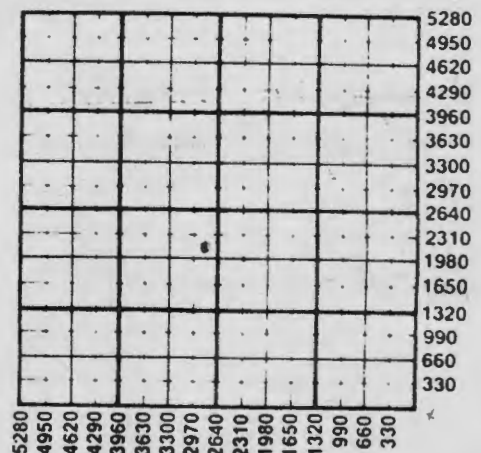
Lease Name NICCHUM Well # 2

Field Name

Producing Formation BARTLESVILLE SANDSTONE

Elevation: Ground KB

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: ☐ Disposal
 Docket # ☐ Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:

Division of Water Resources Permit #

☐ Groundwater.....Ft North from Southeast Corner
 (Well)Ft West from Southeast Corner of
 Sec Twp Rge ☐ East ☐ West

☐ Surface Water.....Ft North from Southeast Corner
 (Stream, pond etc).....Ft West from Southeast Corner
 Sec Twp Rge ☐ East ☐ West

SIDE TWO

Operator Name REN-MAX ENERGY EXPLORATION, INC Lease Name NICCHM Well # 2Sec. 33 Twp. 14S Rge. 22 ☒ East ☐ West County JOHNSON

WELL LOG

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
 Samples Sent to Geological Survey ☐ Yes ☒ No
 Cores Taken ☒ Yes ☐ No

Formation Description

☒ Log ☐ Sample

Name Top Bottom

~~COPY OF HALIBURTON'S~~
~~ANALYSIS ATTACHED~~

~~ATTACHED~~

SQUIRREL 673-678

(NA)

⊗ Similar to wells on lease.

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	6 1/4"	6 1/4"		20'			
COMPLETION	5 1/4"	2 7/8"		900'			

PERFORATION RECORD

Shots Per Foot Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record

(Amount and Kind of Material Used)

Depth

3 SHOTS / FOOT	847' - 854' - 22 HOLES	ATTACHED	

TUBING RECORD Size 2 7/8 Set At 900' Packer atLiner Run ☐ Yes ☒ NoDate of First Production 7/1/95 Producing Method
☐ Flow ☐ Pumpjack ☐ Gas Lift ☐ Other (explain)