

RELEASED

SIDE ONE

23-16-1665 5747
838

Date: JUN 1 1987
STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION OR RECOMPLETION FORM
FROM CONFIDENTIAL
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 9803
Name Wykoma Oil, Inc.
Address P.O. Box 838
City/State/ZIP Pine Bluffs, WY. 82083

Purchaser

Operator Contact Person Kenneth D. Spear
Phone 316-721-0572

Contractor: License # 5101
Name K. & W. Drilling

Wellsite Geologist Kenneth D. Spear
Phone 316-721-0572

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

If OWVO: old well info as follows:
Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

..2-8-86.. ...2-12-86.. ...2-13-86..
Spud Date Date Reached TD Completion Date
1683'
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at...47 feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from...1683...feet depth to surface...175...cmt
Cement Company Name Consolidated
Invoice # 053428

API NO. 15-139-220,062
County Deage
.SE. .SW. .NE. Sec. 23. Twp 16S. Rge. 16. East
West

..3249... Ft North from Southeast Corner of Section
...1499... Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

Lease Name Lamont Hill Resort Well #.2-23.

Field Name

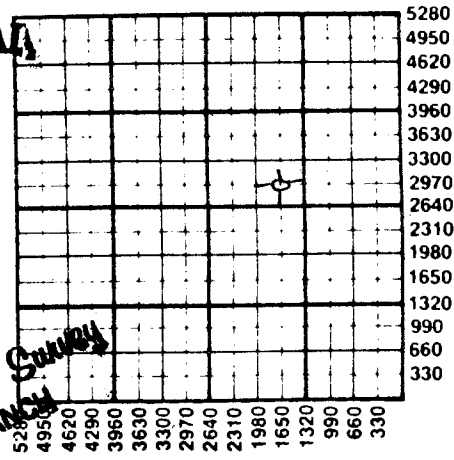
Producing Formation

Elevation: Ground 1104' KB

Section Plat

CONFIDENTIAL

FEB 18 1986
State Geological Survey
WICHITA BRANCH



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

Other (explain).....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form and CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. STATE CORPORATION COMMISSION

SIDE TWO

Operator Name **Wykoma Oil, Inc.** Lease Name **Lamont Hill Resort** Well # **2-23**

Sec. **23** Twp. **16S** Rge. **16** East West County **Osage**

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
Burgess Sd.	1544'	1547'
Mississippian	1610'	not reached

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 7/8"	7"	21	47'	common	42	none
.....
.....

PERFORATION RECORD
Shots Per Foot Specify Footage of Each Interval Perforated
Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
none	none
.....
.....

TUBING RECORD Size Set At Packer at Liner Run Yes No

Date of First Production **none** Producing Method Flowing Pumping Gas Lift Other (explain).....