

KANSAS

WELL COMPLETION REPORT AND DRILLER'S LOG

API No. 15 — 121 County — 2144 Number ¹

*State Geological Survey
WICHITA, BRANCH*

S. 25 T. 16 R. 21 E. W
Loc. 160'SNL 740'WEL E₂ of SW₂
County Miami NW NW N6

Operator
Scimitar Resources Ltd.

Address
P.O. Box 211 Paola, Kansas 66071

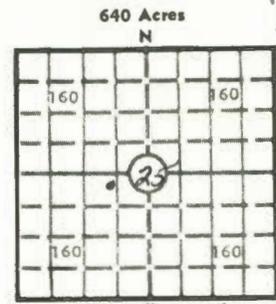
Well No. S-14A Lease Name Pflug

Footage Location 2458 FSL; 2059 FEL-KCC
160 feet from (N) line 740 feet from (E) line

Principal Contractor T. D. Corporation Geologist Jim Stegeman

Spud Date 5/21/80 Date Completed 5/23/80 Total Depth 764' P.B.T.D.

Directional Deviation _____ Oil and/or Gas Purchaser Producers Group



Elev.: Gr. _____
DF _____ KB _____

CASING RECORD

Report of all strings set — surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Production	6 1/8"	4 1/2"	10.5	753'	Portland A	100	4 sks of gel

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
			2 1/2 per ft. 53	3 1/2" strip jets & 2 1/8" glass jets	677-698'

TUBING RECORD

Size	Setting depth	Packer set at

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
350# rock salt	677-698'
8000# 20/40 frac sand	
50 gal. 15% HCL	

INITIAL PRODUCTION

Date of first production 6/16/80 Producing method (flowing, pumping, gas lift, etc.) pumping

RATE OF PRODUCTION PER 24 HOURS	Oil	Gas	Water	Gas-oil ratio
	<u>2.7</u> bbls.		<u>2.5</u> bbls.	

Disposition of gas (vented, used on lease or sold) Vented Producing interval (s) Squirrel

INSTRUCTIONS: As provided in KCC Rule 82-2-125, within 90 days after completion of a well, one completed copy of this Drillers Log shall be transmitted to the State Geological Survey of Kansas, 4150 Monroe Street, Wichita, Kansas 67209. Copies of this form are available from the Conservation Division, State Corporation Commission, 245 No. Water, Wichita, Kansas 67202. Phone AC 316-522-2206. If confidential custody is desired, please note Rule 82-2-125. Drillers Logs will be on open file in the Oil and Gas Division, State Geological Survey of Kansas, Lawrence, Kansas 66044.

Operator		DESIGNATE TYPE OF COMP.: OIL, GAS, DRY HOLE, SWDW, ETC.:
Well No.	Lease Name	
S <u>25</u> T <u>16</u> R <u>21</u> ^E _W		

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
soil & clay	8	8		
lime	19	27		
black shale	5	32		
lime	10	42		
shale	6	48		
lime	2	50		
shale	3	53		
lime	1	54		
shale	1	55		
lime	14	69		
shale	6	75		
red bed	3	78		
shale	19	97		
lime	18	115		
shale	91	206		
lime	20	226		
shale	29	255		
lime	6	261		
shale	26	287		
lime	17	304		
shale	12	316		
lime	28	344		
shale	6	350		
shaley lime	8	358		
lime	17	375		
shale	3	378		
lime	15	393	bottom on hertha	
shale	105	498	Cherokee	
limey shale	6	504		
shale	57	561		
lime	4	565		
shale	9	574		
lime	2	576		
shale	22	598		
lime	2	600		
shale	10	610		
lime	1	611		
shale	8	619		
lime	3	622		
shale	16	638		

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

Date Received	<hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Signature <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Title <hr style="border: none; border-top: 1px solid black; margin-bottom: 5px;"/> Date
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Operator

Schlomitar

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Well No.

S-14A

Lease Name

Pflug

S 25 T 16 R 21 E W

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FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
lime	1	639		
shale	5	644		
lime	4	648		
shale	3	651		
lime	1	652		
shale	2	654		
lime	1	655		
shale	13	668		
lime	2	670		
shale	8	678		
lime	1	679		
sand	1	680		
cored 680-699				
sandy shale	5	704		
shale	17	722		
lime	1	723		
shale	20	743		
lime	2	745		
shale	6	751		
lime	13	764		

TD 764
F/S 753

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

Date Received

Signature

Title

Date