

FORM MUST BE TYPED

* CORRECTED SIDE ONE

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

Operator: License # 32294Name: Osborn Energy, L.L.C.Address 24850 FarleyCity/State/Zip Bucyrus, KS 66013Purchaser: Akawa Natural Gas, L.L.C.Operator Contact Person: Steve AlleePhone (913) 533-9900Contractor: Name: R. S. Glaze Drilling CompanyLicense: 5885Wellsite Geologist: Rex Ashlock

Designate Type of Completion

☐ New Well ☐ Re-Entry ☒ Workover

☐ Oil ☐ SLD ☐ SIOW ☐ Temp. Abd.
☒ Gas ☐ ENHR ☐ SIGW
☐ Dry ☐ Other (Core, USW, Expl., Cathodic, etc)

If Workover:

* Operator: Osborn Energy, L.L.C.Well Name: Someday 15Comp. Date WOC Old Total Depth 960.0'

☒ Deepening ☒ Re-perf. ☐ Conv. to Inj/SLD
☒ Plug Back 840.0' ☐ PSTD
☐ Commingled ☐ Docket No.
☐ Dual Completion ☐ Docket No.
☐ Other (SLD or Inj?) ☐ Docket No.

* 11/9/1999 9/11/99 * 4/2000
d Date Date Reached TD Completion Date

API NO. 15- 121-27480-0001 MAR 16 2001County Miami- NW - SW - NE Sec. 12 Twp. 16 Rge. 24 ☒ E ☐ W1657 Feet from S(N) (circle one) Line of Section2177 Feet from E(W) (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
(NE, SE, NW or SW (circle one))Lease Name Someday Well # 15Field Name Paola-RantoulProducing Formation MississippianElevation: Ground 1041' KB N/ATotal Depth 960' PSTD N/AAmount of Surface Pipe Set and Cemented at 22 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ NoIf yes, show depth set N/A FeetIf Alternate II completion, cement circulated from 949
feet depth to surface w/ 125 sx cmt.Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)Chloride content N/A ppm Fluid volume 500+/- bblsDeaerating method used Evaporation

Location of fluid disposal if hauled offsite:

Operator Name _____

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, 130 S. Market - Room 2078, 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 _____

Title Geologist Date 3-12-01Subscribed and sworn to before me this 12th day of March, 19 2001.Notary Public Alice M. ReevesDate Commission Expires March 22, 2003

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received

Distribution
____ KCC _____ SLD/Rep _____ NCPA
____ KGS _____ Plug _____ Other
(specify)

Form ACD-1 (7-91)

ALICE M. REEVES
Notary Public - State of Kansas
My Appt. Expires 3-22-2003

Operator Name Osborn Energy, L.L.C. Lease Name Someday Well # 15
Sec. 12 Twp. 16 Rge. 24 ☒ East ☐ West
County Miami

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.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> 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	10 3/4"	7"		22'	Portland	3	None
Production	6 3/4"	4 1/2"		949'	Class A	125	2% gel, 2% CaCl
							2% flo-seal, 2% g

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
2	853.0' - 892.0'	1500 gal. of 28% mud-I.S. acid	
	* Bridge Plug @ 840.0'	250 gal of 15% mud acid with claybon	
* 2	490.0'-496.0'	500 gal of 15% HCl acid	
* 2	497.0'-507.0'	4 sacks 200 lb rock salt & 150 sacks of 20/40 sand	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
N/A						
Date of First, Resumed Production, SLD or Inj.		Producing Method				
* 4/2000		N/A <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.
	N/A		30		10	
					Gas-Oil Ratio	Gravity
					N/A	N/A

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

METHOD OF COMPLETION ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled

☒ Other (Specify) SIGW

Production Interval _____