

**KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION**

Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 32977  
 Name: Dorado Gas Resources LLC.  
 Address: 14550 E. Easter Ave. Suite 1000  
 City/State/Zip: Englewood Co. 80112  
 Purchaser: \_\_\_\_\_  
 Operator Contact Person: John Wilson  
 Phone: (720) 889-0510  
 Contractor: Name: McGowan Drlg. Inc.  
 License: 5786  
 Wellsite Geologist: Steve Tedesco  
 Designate Type of Completion:  
☒ New Well    ☐ Re-Entry    ☐ Workover  
☐ Oil    ☐ SWD    ☐ SIOW    ☐ Temp. Abd.  
☒ Gas    ☐ ENHR    ☐ SIGW  
☐ Dry    ☐ Other (Core, WSW, Expl., Cathodic, etc)  
 If Workover/Re-entry: Old Well Info as follows:  
 Operator: \_\_\_\_\_  
 Well Name: \_\_\_\_\_  
 Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
☐ Deepening    ☐ Re-perf.    ☐ Conv. to Enhr./SWD  
☐ Plug Back    ☐ Plug Back Total Depth  
☐ Commingled    Docket No. \_\_\_\_\_  
☐ Dual Completion    Docket No. \_\_\_\_\_  
☐ Other (SWD or Enhr.?)    Docket No. \_\_\_\_\_  
 2-18-02    2-20-02    3-20-02  
 Spud Date or    Date Reached TD    Completion Date or  
 Recompletion Date       Recompletion Date

API No. 15 - 139-20,082-0000  
 County: Osage  
 \_\_\_\_\_ NW NW Sec. 12 Twp. 17 S. R. 16 ☒ East ☐ West  
660 feet from S N (circle one) Line of Section  
670 feet from E W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
    (circle one) NE SE NW SW  
 Lease Name: Gray Well #: 4-12  
 Field Name: Wildcat  
 Producing Formation: Cherokee  
 Elevation: Ground: 1104 Kelly Bushing: \_\_\_\_\_  
 Total Depth: 1626 Plug Back Total Depth: 1622  
 Amount of Surface Pipe Set and Cemented at 43 Feet  
 Multiple Stage Cementing Collar Used? ☐ Yes ☐ No  
 If yes, show depth set \_\_\_\_\_ Feet  
 If Alternate II completion, cement circulated from 1622  
 feet depth to surface w/ 225 sx cmt.

**Drilling Fluid Management Plan**

(Data must be collected from the Reserve Pit)

Chloride content 800 ppm Fluid volume 600 bbls  
 Dewatering method used evaporation

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_  
 Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ East West  
 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 of 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: [Signature]  
 Title: MEMBER Date: 4/22/02  
 Subscribed and sworn to before me this 22nd day of April,  
18 2002  
 Notary Public: [Signature]  
HILDRED E. BERARD  
 Date Commission Expires: 9-25-02

**KCC Office Use ONLY**

☐ Letter of Confidentiality Attached  
 If Denied, Yes ☐ Date: \_\_\_\_\_  
☐ Wireline Log Received  
☐ Geologist Report Received  
☐ UIC Distribution

Operator Name: Dorado Gas Resources LLC. Lease Name: Gray Well #: 4-12  
 Sec. 12 Twp. 17 S. R. 16 ☒ East ☐ West County: Osage

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☐ No  
 (Attach Additional Sheets)  
 Samples Sent to Geological Survey ☐ Yes ☐ No  
 Cores Taken Yes No  
 Electric Log Run Yes No  
 (Submit Copy)

List All E. Logs Run:

ML DIL

Log Formation (Top), Depth and Datum Sample  
 Name Top Datum

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	12 1/4	8 5/8	24	43	common	35	
Production	6 3/4	4 1/2	10.50	1622	50/50 poz	225	3% gel

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
4	1280-1286	fracture	
4	1486-1488	fracture	
4	1508-1512	fracture	
4	1516-1521	fracture	
		Total Sand 29,100#	
TUBING RECORD		Liner Run	
Size	Set At	Packer At	Yes No
Date of First, Resumed Production, SWD or Enhr.	Producing Method		
	Flowing	Pumping	Gas Lift Other (Explain)
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease  
 (If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify) \_\_\_\_\_