

REVISED

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm A
September 1995
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5192

Name: Shawmar Oil & Gas Co., Inc.

Address: P.O. Box 9

City/State/Zip: Marion, KS 66861

Purchaser: NCRA

Operator Contact Person: James M. Cloutier

Phone: (620) 382-2932

Contractor: Name: KAN-DRILL, INC

License: 32548

Wellsite Geologist:

Designate Type of Completion:

Release

New Well Re-Entry Workover MAR 10 2003
 Oil SWD SLOW Temp. Abd. From
 Gas ENHR SIGW Confidential
 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.

10/21/2001 10/25/2001 03/08/02

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 017-2081940000

County: Chase

C SE¹ NW¹ Sec. 23 Twp. 18 S. R. 6 East West
1980 feet from S / N (circle one) Line of Section

1980 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: LIPS Well #: 12-23

Field Name: Diamond Creek

Producing Formation: Lansing

Elevation: Ground: 1487 Kelly Bushing:

Total Depth: 1602 Plug Back Total Depth:

Amount of Surface Pipe Set and Cemented at 204 Feet

Multiple Stage Cementing Collar Used?

 Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

ALT II

DPW
3-7-03

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used:

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: 

Title: President Date: Feb. 18, 2002

Subscribed and sworn to before me this 18th day of February

2002

Notary Public: CAROL MAKOVEC
NOTARY PUBLIC

STATE OF KANSAS

Date Commission Expires: March 1, 2004

My Appt. Exp. 03/01/04

KCC Office Use ONLY

YES Letter of Confidentiality Attached

 If Denied, Yes Date: _____ Wireline Log Received Geologist Report Received UIC Distribution

Operator Name: Shawmar Oil & Gas Co., Inc. Lease Name: Lips Well #: 12-23
 Sec. 23 Twp. 18 S. R. 6 East West County: Chase

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum Name: <u>Lansing/KC</u> Top <u>1504</u>	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
List All E. Logs Run: Dual Compensated Porosity Log Dual Induction Log Sonic Cement Bond Log			

CASING RECORD <input 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	12 1/4	8 5/8	23#	204	regular	110	3% CAC1Z 25# flocele
Longstring	6 3/4	4 1/2	10.5#	1586	Thick Set	210	50# flocele

ADDITIONAL CEMENTING / SQUEEZE RECORD							
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives			
Perforate							
Protect Casing							
Plug Back TD							
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	1514-1524	2500 15% NEFE 2500 gal. 20% gelled retarded	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	2 3/8	1529	N/a			

Date of First, Resumed Production, SWD or Enhr.	Producing Method	<input type="checkbox"/> Flowing	<input checked="" type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain)
March 11, 2002					

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	18	15	75		35

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease
(If vented, Sumit ACO-18.) Open Hole Perf. Dually Comp. Commingled 1514-1524

Other (Specify) _____