

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 # 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:

☒ 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. _____

10/21/2001 10/25/2001 Not yet
Spud Date or Date Reached TD completed
Recompletion Date Completion Date or
Recompletion Date

API No. 15 - 017-20819-0000
County: Chase
C. SE $\frac{1}{4}$ NW $\frac{1}{4}$ 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)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if located offsite: _____

Operator Name: _____

Lease Name: KCC WICHITA 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: James M. Cloutier

Title: President Date: Feb. 18, 2002

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

2002

Notary Public: Carol Makovec

CAROL MAKOVEC
NOTARY PUBLIC
STATE OF KANSAS

Date Commission Expires: March 1, 2004

My Appt. Exp. 03/01/04

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution