

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 # 4567
Name: D.E. Exploration, Inc.
Address: P.O. Box 128
City/State/Zip: Wellsville, KS 66092-0128
Purchaser: Plain's Marketing, LP
Operator Contact Person: Doug Evans
Phone: (785) 883-4057
Contractor: Name: Finney Drilling Company
License: 5989
Wellsite Geologist: None
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. Pending
8/6/02 8/9/02 8/9/02
Spud Date or Date Reached TD Completion Date or Recompletion Date
Recompletion Date

API No. 15 - 031-21,942-0000
County: Coffey
SW NW NE Sec. 28 Twp. 22 S. R. 16 ☒ East ☐ West
GPS 2226 4285 feet from (S) N (circle one) Line of Section
GPS 4303 2255 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Elev. Name: Flake Well #: RI-1
Field Name: Neosho Falls Leroy
Producing Formation: Squirrel
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 1052 Plug Back Total Depth: NA
Amount of Surface Pipe Set and Cemented at 44.10 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1043.40
feet depth to Top w/ 123 sx cmt.

Drilling Fluid Management Plan ALL 11 W/ 7.28.03
(Data must be collected from the Reserve Pit)
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: Douglas B. Evans
Title: President Date: 4-24-03
Subscribed and sworn to before me this 24th day of April, 2003
Notary Public: Stacy J. Shyer
Date Commission Expires: 3-31-07

KCC Office Use ONLY

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

Operator Name: D.E. Exploration, Inc. Lease Name: Flake Well #: RI-1
 Sec. 28 Twp. 22 S. R. 16 ☒ East ☐ West County: Coffey

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:

Gamma Ray/Neutron/CCL

☐ 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	# Sacs Used	Type and Percent Additives
Surface	12	7	19	44.10	Portland	49	Service Co.
Production	5 5/8	2 7/8	6.5	1043.40	50-50	123	Service Co.

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
26	996.0-1008.0	2" DML RTG	996.0
			1008.0

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8	1043.40	No	☐ Yes ☒ No
Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
NA	☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
			NA	

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) _____