

FORM MUST BE TYPED

SIDE ONE

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

API NO. 15- 003-23,663

County ANDERSON

sw .ne .sw .ne Sec. 1 Twp. 22 Rge. 19e

3590' Feet (circle one) of Section Line

1720' Feet (circle one) of Section Line

Footages Calculated from Nearest Outside Section Corner: 11  
NE, SW or NW (circle one)

Lease Name ADAMS Well # 1-B

Field Name WELDA

Producing Formation NA

Elevation: Ground 1130' KS

Total Depth 1208' PSTB surf.

Amount of Surface Pipe Set and Cemented at 22' Feet

Multiple Stage Cementing Soller Used? Yes X No

If yes, show depth set Feet

If Alternate II completion, cement circulated from

feet depth to na w/ as amt.

Drilling Fluid Management Plan *Alt 2 Oils ODH*  
(Data must be collected from the Reserve Pit)

Chloride content 26,000 ppm Fluid volume 55 bbls

Dewatering method used EVAPORATION

Location of fluid disposal if hauled offsite:

Operator Name

Lease Name License No.

Quarter Sec. Twp. Rge. SW

County Booklet No.

Operator: License # 9851

Name: PRYOR OIL CO., INC.

Address 473 N. SHORE DR.

PARKVILLE

City/State/Zip MISSOURI 64151

na

Purchaser:

Operator Contact Person: JIM PRYOR

Phone (816) 587-1225

Driller: Name: HUTTON DRILLING

License: 4160

Wellsite Geologist: DAVID GRIFFIN

Designate Type of Completion

X New Well Re-Entry Markover

Oil SWD SOW Temp. Abd.

Gas SWD SOW

X Dry Other (Sore, WDM, Enpl., Cathodic, etc)

If Markover/Re-Entry, old well info as follows:

Operator:

Well Name:

Comp. Date Old Total Depth

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PSTB

Cemented Bucket No.

Dual Completion Bucket No.

Other (SWD or Inj?) Bucket No.

8/10/92 8/13/92 8/13/92

Start Date Date Reached TD Completion Date

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 288 Colorado Derby Building, 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 CERTIFIED TRUSTS ST 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 9-16-92

Subscribed and sworn to before me this 16 day of September

1992

Notary Public

Date Completion Expires

11-27-92

RECEIVED  
STATE CORPORATION COMMISSION

SEP 21 1992

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached  
G Wireline Log Received  
C Geologist Report Received

Distribution

KCC JIC SWD/Rep NAPA  
Plug Other  
(Specify)

CONSERVATION DIVISION  
Wichita, Kansas

Form ACO-1 (7-91)

Well: 1 Top: 22 Age: 19e

☒ East  
☐ West

County ANDERSON

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests giving interval tested, time test 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.) ☐ Yes ☒ No

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run  
(Submit Copy.) ☐ Yes ☒ No

List All E-Logs Run: none

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

Name Top Datum

| CASING RECORD <input type="checkbox"/> New <input checked="" 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 1/2"           | 7"                        | 17#             | 22'           | PORTLD. A      | 9            | -0-                        |
|                                                                                     |                   |                           |                 |               |                |              |                            |
|                                                                                     |                   |                           |                 |               |                |              |                            |

| ADDITIONAL CEMENTING/SQUEEZE RECORD |                  |                |             |                            |
|-------------------------------------|------------------|----------------|-------------|----------------------------|
| Purpose:                            | Depth Top Bottom | Type of Cement | #Sacks Used | Type and Percent Additives |
| Perforate                           |                  |                |             |                            |
| Protect Casing                      |                  |                |             |                            |
| Plug Back To                        |                  | N/A            | N/A         |                            |
| 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 |  |
|----------------|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--|
| N/A            | N/A                                                                                    | N/A                                                                                  |  |
|                |                                                                                        |                                                                                      |  |
|                |                                                                                        |                                                                                      |  |
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|------------------------------------------------|-----|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|----------------------------------------------------------|-------|-----|---------------|---------|
| TUBING RECORD                                  |     | Size | Set At                                                                                                                                                        | Packer At | Liner Run | <input type="checkbox"/> Yes <input type="checkbox"/> No |       |     |               |         |
|                                                |     | N/A  |                                                                                                                                                               | N/A       |           |                                                          |       |     |               |         |
| Date of First, Resumed Production, SMD or Inj. |     |      | Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) |           |           |                                                          |       |     |               |         |
|                                                |     |      |                                                                                                                                                               |           |           |                                                          |       |     |               |         |
| Estimated Production Per 24 Hours              | Oil | N/A  | Bbls.                                                                                                                                                         | Gas       | N/A       | Water                                                    | Bbls. | N/A | Gas-Oil Ratio | Gravity |
|                                                |     |      |                                                                                                                                                               |           |           |                                                          |       |     |               |         |
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|                                                |     |      |                                                                                                                                                               |           |           |                                                          |       |     |               |         |

Disposition of Gas: ☐ Ventd ☐ Sold ☐ Used on Lease (If vented, submit AGU-10.)

METHOD OF COMPLETION ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Cemented ☐ Other (Specify) N/A

Production Interval N/A