

20-23-14E

15-207-00545-000

COPY

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

Operator: License # 06757

Name: Corinne Maclaskey Ford

Address R.R.1 Box 112

Gridley, Ks. 66852

City/State/Zip _____

Purchaser: Kelly Maclaskey Oilfield Ser.

Operator Contact Person: Corinne Maclaskey Ford

Phone (316) 836-4000

Contractor: Name: Charlie Maclaskey

License: 07791

Wellsite Geologist: _____

Designate Type of Completion

____ New Well ____ Re-Entry X Workover

X Oil ____ SWD ____ S10W ____ Temp. Abd.
____ Gas X ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: Charlie Maclaskey

Well Name: Maclaskey B

Comp. Date Jan. 1991 Old Total Depth 1659'

X Cementing hole in casing
____ Deepening ____ Re-perf. X Conv. to (Inj) SWD (12/95)

____ Plug Back ____ PBTD

____ Commingled ____ Docket No. _____

____ Dual Completion ____ Docket No. _____

____ Other (SWD or Inj?) ____ Docket No. _____

Nov. 1990 Jan. 1991 Jan. 1991
DATE OF START Date Reached TD Completion Date of
OF WORKOVER WORKOVER

API NO. 15- Drilled 1958

County Woodson

SW - SE - SW-SE/4 Sec. 20 Twp. 23 Rge. 14 XXE W

350 Feet from SW (circle one) Line of Section

3840 Feet from EW (circle one) Line of Section

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

Lease Name Maclaskey "B" Well # 3

Field Name Winterschie d

REPRESSURED
~~Producing~~ Formation Mississippi

Elevation: Ground 1090 KB _____

Total Depth 1661 PBTD _____

Amount of Surface Pipe Set and Cemented at 42 Feet

Multiple Stage Cementing Collar Used? ____ Yes XX No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 440'
Hole in casing
feet depth to surface w/ 115 sx cmt.

Drilling Fluid Management Plan REWORK JKH 3-5-96
(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 Rng. ____ E/W

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 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 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 Corinne Maclaskey - Ford

Title Owner Date 10/2/95

Subscribed and sworn to before me this 2nd day of Oct, 19 95.

Notary Public B. J. H.

Date Commission Expires _____

K.C.C. OFFICE USE ONLY

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

Distribution

KCC SLD/Rep NGPA
 KGS PLUG RECEIVED Other

STATE CORPORATION (Specify)

OCT 2 1995

BRUCE TRIMBLE
My Appt. Exp. 8-15-97

341-82-08

SIDE TWO

Operator Name Corinne Maclaskey Ford Lease Name Maclaskey "B" Well # 3

Sec. 20 Twp. 23 Rge. 14 East West
 County Woodson

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mississippi	1646'-1661' -556
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E.Logs Run:			

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	N/A	8-5/8"	N/A	42'	N/A	N/A	N/A
Longstring	7-7/8"	5 1/2"	N/A	1646'	Reg.	30sx	N/A

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Surface 440'	Class "A" Neet (Regular)	115sx.	None

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type	Acid, Fracture, Shot, Cement Squeeze Record
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used) Depth
	1646' - 1660' OPEN HOLE	

TUBING RECORD	Size 2-7/8"	Set At 1612'	Packer At 1612"	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. Waiting on final approval	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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
			~104	

Disposition of Gas: **METHOD OF COMPLETION** Injection ~~Production~~ Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled 1646'-1660'
 (If vented, submit ACO-18.) Other (Specify) _____