

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 # 30661
Name: L & B Crude Inc.
Address: 402 W. 7th
City/State/Zip: Neosho Falls, KS 66758
Purchaser: PLAINS
Operator Contact Person: Jay E. Leedy
Phone: (620) 963-7303
Contractor: Name: Nick Brown
License: ~~KKKKK~~ 32642
Wellsite Geologist: _____

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover
☒ Oil ☐ SWD ☐ SLOW ☐ 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. _____

3-3-07 3-10-07 4-4-07
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

per oper-KCC-Dlg.

API No. 15 - 207-27078-0000
County: Woodson
NW-SENE-25 Sec. 23 Twp. 16 S. R. 4 East ☒ West ☐
3420 feet from S / N (circle one) Line of Section
1020 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW

Lease Name: Leedy Well #: 20
Field Name: LeRoy-Neosho Falls

Producing Formation: squirrel
Elevation: Ground: 980 est Kelly Bushing: _____

Total Depth: 984 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 40' Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 984

feet depth to surface w/ 110 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 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: Jay E. Leedy
Title: President Date: 5-8-07

Subscribed and sworn to before me this 8 day of May,
2007.

Notary Public: Susan Leedy
SUSAN LEEDY
Notary Public - State of Kansas

Date Commission Expires: 5-19-09 My Appt. Expires 5-19-09

KCC Office Use ONLY

☒ Letter of Confidentiality Received

If Denied, Yes ☐ Date: _____

☒ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

RECEIVED
KANSAS CORPORATION COMMISSION

MAY 14 2007

CONSERVATION DIVISION
WICHITA, KS

163849

Side Two

Operator Name: Jay E. Leedy Lease Name: Leedy Well #: 20
 Sec. 25 Twp. 23 S. R. 16 ☒ East ☐ West County: Woodson

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:

☐ 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	# Sacks Used	Type and Percent Additives
surface	12"	7"		40'	Portland	20	none
casing	5 5/8	2 7/8	used	984'	Portland	110	none

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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
2			

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 7/8	984		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method			
3-27-08	<input type="checkbox"/> Flowing <input checked="" 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
	2		2	
				Gravity
				26

Disposition of Gas ☒ Vented ☐ Sold ☐ Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION ☐ Open Hole ☒ Pert. ☐ Dually Comp. ☐ Commingled

Production Interval ☐ Other (Specify)