

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

Form ACO-1
September 1999
Form Must Be Typed

Operator: License # 32187
Name: Southwind Exploration, LLC
Address: P.O. Box 34
City/State/Zip: Piqua, KS. 66761
Purchaser: N/A
Operator Contact Person: F.L. Ballard
Phone: (620) 468-2885
Contractor: Name: McPherson Drilling
License: 5675
Wellsite Geologist: _____
Designate Type of Completion:
X New Well _____ Re-Entry _____ Workover
_____ Oil _____ SWD _____ SIOW _____ Temp. Abd.
_____ Gas X 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. _____
6-13-01 6-14-01 7-27-01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 031219270000
County: Coffey
SE SE NW NW Sec. 11 Twp. 23 S. R. 16 ☒ East ☐ West
4125 feet from (S) / N (circle one) Line of Section
4125 feet from (E) / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE (SE) NW SW
Lease Name: Freeman "A" Well #: 11
Field Name: LeRoy - Neosho Falls
Producing Formation: Squirrel
Elevation: Ground: 983 Kelly Bushing: _____
Total Depth: 1014 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 46 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1010'
feet depth to surface w/ 160 sx cmt.
Drilling Fluid Management Plan ALT. 2 gR 01/15/02
(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: F.L. Ballard
Title: Agent Date: September 13, 2001
Subscribed and sworn to before me this 13 day of September,
2001
Notary Public: Becky Lewis
Date Commission Expires: February 1, 2005

KCC Office Use ONLY

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

Operator Name: Southwind Exploration, LLC Lease Name: Freeman "A" Well #: 11
 Sec. 11 Twp. 23 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:	☐ Log Formation (Top), Depth and Datum ☐ Sample Name Top Datum see attached logs
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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	11"	7"	20	40'	Portland	25	3% Cac1
Production	6 3/4"	4 1/2"	10.5#	1010'	Portland	160	2% gel, 5% salt

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
2	966-975	Frac with 5 sacks 20-40 sand and		
		10 sacks 12-20 in gelled water		
TUBING RECORD		Size	Set At	Packer At
Date of First, Resumed Production, SWD or Enhr. well is not on production 8-9-01		Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

Disposition of Gas		METHOD OF COMPLETION		INJECTION Production Interval		964'-973' SQUIRREL	
☐ Vented	☐ Sold	☐ Used on Lease	☐ Open Hole	☒ Perf.	☐ Dually Comp.	☐ Commingled	
(If vented, Sum? ACO-18.)			☐ Other (Specify) _____				