

65601

7-5-92

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

API NO. 15- 011-22,729
County Bourbon
SE 1/4 Sec. 17 Twp. 24 Rge. 22

COPY

2450 Feet from S Line of Section
1500 Feet from E Line of Section

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

Lease Name J K Well # 50

Field Name Bronson-Xenia

Producing Formation None Dry

Elevation: Ground na KB _____

Total Depth 650 ft. PBTD 650 ft.

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes X No _____

If yes, show depth set Well was dry and plugged

If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ ex cat.

Drilling Fluid Management Plan Air-D Bra
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Watering method used Drilled with air rig

Location of fluid disposal if hauled offsite: _____

Operator Name Apollo Production Inc.

Lease Name J K License No. 6788

SE Quarter Sec 17 Twp. 24 S Rng. 22

County Bourbon Docket No. NA

Operator: License # 6788

Name: Apollo Production Inc.

Address RR 1, Box 80

Toronto, Kansas 66777

City/State/Zip _____

Purchaser: None

Operator Contact Person: Ray Nordmeyer

Phone (316) 637-2954

Contractor: Name: Big-E Drilling

License: 6451

Wellsite Geologist: No

Designate Type of Completion
 New Well _____ Re-Entry _____ Workover _____

Oil _____ SWD _____ S10W _____ Temp. Abd. _____

_____ Gas _____ ENHR _____ S10W _____

_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

_____ Deepening _____ Re-perf. _____ Conv. to Inj/SWD _____

_____ Plug Back _____ PBTD _____

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

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

Spud Date _____ Date Reached TD _____ Completion Date _____

RECEIVED
JUN 29 1992
STATE CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
Wichita Kansas

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 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 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 Harry Nordmeyer
Title President Date 6-24-92

Subscribed and sworn to before me this 26th day of June, 92.

Notary Public Nancy L. Fife Woodson County

Date Commission Expires _____

NANCY L. FIFE
Notary Public - State of Kansas
My Appt. Expires 2-17-96

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
KCC _____ SWD/Rep _____ NGPA _____
KGS _____ Plug _____ Other _____ (Specify)

Operator Name Apollo Production Inc.

Lease Name J K

Well # 50

Sec. 17 Twp. 24 Rge. 22

East

County Bourbon

West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests (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 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

I do not have any logs of this well as it was drilled by a previous lease owner.

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 casing	8 1/2	6 5/8	9	20 ft.	Portland	5	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				
		Hole was dry and plugged.		

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	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD 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 Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACD-18.)

Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____