

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Form ACO-1  
September 1999  
Form Must Be Typed

Operator: License # 4339  
Name: Dale Jackson Production Co.  
Address: 401 Vine  
City/State/Zip: Blue Mound/ Ks/ 66010  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Dale Jackson  
Phone: ( 913 ) 756-2246  
Contractor: Name: Dale Jackson Production Co.  
License: 4339  
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. \_\_\_\_\_

8-14-06	8-22-06	8-22-06
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 011-231900000  
County: Bourbon  
NW SW NE Sec. 6 Twp. 24 S. R. 24 ☒ East ☐ West  
3305 feet from θ / N (circle one) Line of Section  
2146 feet from θ / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW  
Lease Name: Feggins East Well #: F30  
Field Name: Harding  
Producing Formation: Squirrel  
Elevation: Ground: t865 Kelly Bushing: \_\_\_\_\_  
Total Depth: 414 Plug Back Total Depth: 165.5  
Amount of Surface Pipe Set and Cemented at 20 Feet  
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from surface  
feet depth to 150 w/ 20 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: Dale Jackson  
Title: Owner Date: 1/2/07  
Subscribed and sworn to before me this 2 day of January,  
2007.  
Notary Public: Laura E Sandness  
Date Commission Expires: 6-20-09

KCC Office Use ONLY

N Letter of Confidentiality Received  
If Denied, Yes ☐ Date: \_\_\_\_\_  
\_\_\_\_\_ Wireline Log Received  
\_\_\_\_\_ Geologist Report Received  
\_\_\_\_\_ UIC Distribution



Operator Name: Dale Jackson Production Co. Lease Name: Feggins East Well #: F30  
 Sec. 6 Twp. 24 S. R. 24 ☒ East ☐ West County: Bourbon

**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
Squirrel	148	
Bartlesville	328	

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	12 3/4	6"		20	Portland	5	None
Casing	5 1/2	2 3/8		150	Portland	20	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 checked="" type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	165.5-414	Portland	28	None

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 2 3/8	Set At 150	Packer At 150	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr. 9-8-06		Producing Method <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. 1 bbl.	Gas Mcf None	Water Bbls. 5 bbl.	Gas-Oil Ratio	Gravity 30

Disposition of Gas

METHOD OF COMPLETION

Production Interval

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

☒ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify) \_\_\_\_\_