

2-25-82E Ind 91

TYPE

AFFIDAVIT OF COMPLETION FORM

ACO-1 WELL HISTORY

Compt. _____

SIDE ONE

(Rules 82-3-130 and 82-3-107)

DOCKET NO. NP _____

This form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ninety (90) days after the completion of a well, regardless of how the well was completed.

State Geological Survey
WICHITA BRANCH

FOR INFORMATION REGARDING THE NUMBER OF COPIES TO BE FILED AND APPLICATIONS REQUIRING COPIES OF ACO-1 FORMS SEE PAGE TWO (2), SIDE TWO (2) OF THIS FORM.

F _____ Letter requesting confidentiality attached.

C _____ Attach ONE COPY of EACH wireline log run (i.e. electrical log, sonic log, gamma ray neutron log etc.)***Check here if NO logs were run X.

PLEASE FILL IN ALL INFORMATION. IF NOT AVAILABLE, INDICATE. IF INFORMATION LATER BECOMES AVAILABLE, SUBMIT BY LETTER.

LICENSE # _____ EXPIRATION DATE _____

OPERATOR Dean R. Rogers API NO. 15-011-21-609

ADDRESS Box 212 Bronson, Kansas COUNTY Bourbon

FIELD _____

** CONTACT PERSON Dean R. Rogers PHONE 316-939-4728 PROD. FORMATION _____
Indicate if new pay.

PURCHASER _____ LEASE Carmean

ADDRESS _____ WELL NO. 2

WELL LOCATION 1725EWL & 1755NSL

DRILLING Jackson / Neville Drilling Co. _____ Ft. from _____ Line and

CONTRACTOR _____

ADDRESS, P. O. Box 41 _____ Ft. from _____ Line of

the _____ (Qtr.) SEC 7 TWP 25 RGE 22 (E)

~~Bronson, Kansas 66716~~

PLUGGING Jackson / Neville Drilling Co.

CONTRACTOR _____

ADDRESS P.O. Box 41

Bronson, Kansas 66716

TOTAL DEPTH 746 PBTD _____

SPUD DATE Jan 26, 1982 DATE COMPLETED Jan 28, 1982

ELEV: GR _____ DF _____ KB _____

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS.

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE _____

WELL PLAT			

(Office Use Only)

KCC _____
KGS
SWD/REP _____
PLG. _____
NGPA _____

Amount of surface pipe set and cemented 100 feet DV Tool Used? N A

TYPE OF COMPLETION THIS AFFIDAVIT APPLIES TO: (Circle ONE) - Oil, Shut-in Gas, Gas, Dry, Disposal, Injection, Temporarily Abandoned. If OWWO, indicate type of re-completion _____. Other completion _____. NGPA filing _____.

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

A F F I D A V I T

Dean R. Rogers, Jr., being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

Side TWO

OPERATOR DR Rogers LEASE NAME Carmean SEC 7 TWP 25 RGE 22
 WELL NO 2

FILL IN WELL INFORMATION AS REQUIRED:

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

Show Geological markers, logs run, or other Descriptive information.

Formation description, contents, etc. Top Bottom Name Depth

<p><input checked="" type="checkbox"/> Check if no Drill Stem Tests Run. <input checked="" type="checkbox"/> Check if samples sent Geological Survey.</p>					
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If additional space is needed use Page 2

Report of all strings set — surface, intermediate, production, etc. **CASING RECORD (New) or (Used)**

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Socks	Type and percent additives

LINER RECORD			PERFORATION RECORD		
Top, ft.	Bottom, ft.	Socks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD		
Size	Setting depth	Pecker set at

State Geological Survey
MICHITA BRANCH