

**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 # 5488
Name: TWM Production Company
Address: 1150 Highway 39
City/State/Zip: Chanute, Kansas 66720
Purchaser: Crude Marketing Inc.
Operator Contact Person: Michael Or Carol Wimsett
Phone: (620) 431-4137
Contractor: Name: W & W Production Company
License: 5491
Wellsite Geologist: N/A
Designate Type of Completion:
☒ New Well ☐ Re-Entry ☐ Workover
☒ Oil ☐ SWD ☐ SIOW ☐ 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. _____

<u>10/21/02</u>	<u>11/11/02</u>	<u>11/27/02</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 15-00128964-00-00
County: Allen
w2 E2 S W4 Sec. 22 Twp. 26 S. R. 18 ☒ East ☐ West
1900 feet from S N (circle one) Line of Section
3650 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Cannon A Well #: 21

Field Name: Chanute/Humboldt

Producing Formation: Bartlesville

Elevation: Ground: n/a Kelly Bushing: _____

Total Depth: 905 Plug Back Total Depth: _____

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 905

feet depth to top w/ 160 sx cmt.

Drilling Fluid Management Plan File 11 En 2.4.03
(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: Carol A. Wimsett

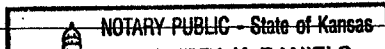
Title: Office Manager Date: 12-23-02

Subscribed and sworn to before me this 23rd day of December

in 2002

Notary Public: Debra K. Daniels

Date Commission Expires: _____



KCC Office Use ONLY

NO Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

YES Wireline Log Received

NO Geologist Report Received

____ UIC Distribution

Operator Name: TWM Production Company Lease Name: Cannon A Well #: 21
 Sec. 22 Twp. 26 S. R. 18 ☒ East West County: Allen

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 pipe	7.5	6.25		20	portland	6	
production	2-7/8			804	portland	160	3 sacks

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	Perforated 772.5 to 778.5 and 798 to 804.0	Frac well 80 sacks	

TUBING RECORD		Size	Set At	Packer At	Liner Run	
		2-3/8	804		Yes	No
Date of First, Resumed Production, SWD or Enhr.		Producing Method				
11-27-02		Flowing <input checked="" type="checkbox"/> Pumping Gas Lift Other (Explain)				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity	
	5					

Disposition of Gas METHOD OF COMPLETION

Production Interval

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

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