

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

Operator: License # 5115

Name: Reese Oil Company

Address 6220 Arlington

Raytown, MO 64133

City/State/Zip _____

Purchaser: Plains Transport

Operator Contact Person: Terry Miller

Phone (816) 356-1970

Contractor: Name: Xenia Corp.

License: 4693

Wellsite Geologist: None

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: _____

Comp. Date _____ Old Total Depth _____

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

☐ Plug Back ☐ PBD

☐ Commingled ☐ Docket No. _____

☐ Dual Completion ☐ Docket No. _____

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

3-5-94

3-8-94

3-8-94

Spud Date

Date Reached TD

Completion Date

API NO. 15- 011-22,838

County Bourbon

SE NE SW SE Sec. 23 Twp. 26 Rge. 21 ☒ E ☐ W

825

Feet from ☒ N (circle one) Line of Section

1485

Feet from ☒ W (circle one) Line of Section

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

Lease Name SMITH Well # 3-94

Field Name Bronson

Producing Formation Bartlesville

Elevation: Ground N/A KB _____

Total Depth 614 PBD 596

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 _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 2 J 94 6-29-95
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Drill with fresh water.
Pumped out on ground and cover pit.
Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

_____ Quarter Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

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 T J Reese

Title President Date 3/31/94

Subscribed and sworn to before me this 31 day of March, 19 94.

Notary Public Tammy L Cole

Date Commission Expires May 31, 1997

TAMMY L COLE

Notary Public - State of Missouri
Commissioned in Jackson County
My Commission Expires May 31, 1997

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) JS

RECEIVED

STATE CORPORATION COMMISSION

Form ACO-1 (7-91)

APR 11 1994

Operator Name REESE OIL COMPANYLessee Name SmithWell # 3-94Sec. 23 Twp. 26 Rge. 21☒ EastCounty Bourbon☐ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken
(Attach Additional Sheets.)☐ Yes ☒ No

Samples Sent to Geological Survey

☐ Yes ☒ No

Cores Taken

☐ Yes ☒ NoElectric Log Run
(Submit Copy.)☐ Yes ☒ No

List All E.Logs Run:

☐ Log

Formation (Top), Depth and Datum

☐ Sample

Name

Top

Datum

0-4

Soil

20 - 108

Lime

122-594

Lime & Shale

614

Sand T.D.

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	10"	7"		20	Portland	3	
Production	7"	2-7/8"		596	PORTLAND	65	2% GEL

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				

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
	596'-613' Open Hole	60 sacks sand	
		100# water gel	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	None				
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
3-17-94					
Estimated Production Per 24 Hours	Oil 1 Bbls.	Gas Mcf	Water 1 Bbls.	Gas-Oil Ratio 50%	Gravity 29

Disposition of Gas:

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

METHOD OF COMPLETION

☒ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled

Production Interval

☐ Other (Specify) _____
 100% to 100% of production