

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

ORIGINAL

Operator: License # 32177
Name: Lazy J Oil & Gas, LLC
Address: RR 4 Box 157
City/State/Zip: Fredonia, KS 66736
Purchaser: Energetics LTD.
Operator Contact Person: Jerry Hall
Phone: (620) 378-2487
Contractor: Name: Mokat
License: 5831
Wellsite Geologist: Harley Gilbert

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. _____

1-8-04 1-10-04 1-10-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 205-25699-0000
County: Wilson
NW SE SE Sec. 14 Twp. 29 S. R. 15 ☒ East ☐ West
970 feet from (S) N (circle one) Line of Section
1225 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Frankenberry Well #: 3

Field Name: Fredonia Summit-Mulkey, Mulberry
Producing Formation: Bartlesville, Tebo, Mineral, Fleming

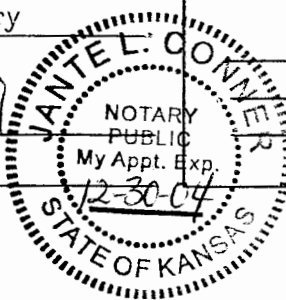
Elevation: Ground: 970 est. Kelly Bushing: _____
Total Depth: 1138' Plug Back Total Depth: 1126'
Amount of Surface Pipe Set and Cemented at 20' Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1126'
feet depth to surface w/ 135 sx cmt.

Drilling Fluid Management Plan Air drilled
(Data must be collected from the Reserve Pit) No - water
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: Jerry Hall
Title: Operator Date: 02/27/04
Subscribed and sworn to before me this 27th day of February
2004.
Notary Public: Gante L. Conner
Date Commission Expires: Dec. 30, 2004



KCC Office Use ONLY

☐ Letter of Confidentiality Attached
If Denied, Yes ☐ Date: _____
☐ Wireline Log Received
☐ Geologist Report Received
☐ UIC Distribution

50590

Side Two

ORIGINAL

Operator Name: Lazy J Oil & Gas LLC Lease Name: Frankenberry Well #: 3
 Sec. 14 Twp. 29 S. R. 15 ☒ East ☐ West County: Wilson

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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Mulberry	687 690
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Summit	768 771
		Mulkey	783 786
		Scammon	897 900
		Mineral	911 914
		Tebo	927 930
		Bartlesville	985 1063

List All E. Logs Run:
 Gamma ray - CCL log
 High resolution compensated
 Density Neutron log

RECEIVED
MAR 01 2004
KCC WICHITA

CASING RECORD <input checked="" 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"	8 5/8	22	21	Portland	7	0
Production	6 3/4	4 1/2	10.5	1128	Thix-set	135	34# FLOCELE

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
2	1036-1040 & 1028-1031 & 1014-1017	500 gal. 15% HCL FE	1014-1040
4	927-930 & 911-914 & 897-900	500 gal. - 15% HCL acid 5775# 20/40 sand	927-30 911-148897-900
4	783.5-786.5 768.5-771.5	500 gal. 15% HCL acid 5775# 20/40 sand	783.5-786.5 768.5-771.5
4	687-690		687-690

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 3/8	1065'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr. 02/14/04		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	90,000	50		

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

METHOD OF COMPLETION: ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☒ Commingled ☐ Other (Specify) _____

Production Interval: _____