

COPY

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

Operator: License # 9313Name: James D. LorenzAddress 18080 Kiowa Rd.Parsons, KS 67357

City/State/Zip _____

Purchaser: EOTTOperator Contact Person: Jim LorenzPhone (316) 421-6906Drill Contractor: Name: Mokat DrillingLicense: 5831

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/Reentry: Old Well Info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD☐ Plug Back ☐ PBTD☐ Commingled ☐ Docket No. _____☐ Dual Completion ☐ Docket No. _____☐ Other (SWD or Inj?) ☐ Docket No. _____19-97 9-23-97

Date Date Reached TD Completion Date

API NO. 15- 205-251720000County Wilson- NW - NW - NE Sec. 15 Twp. 29 Rge. 15 ^{NE} _W4950 Feet from S (circle one) Line of Section2310 Feet from E (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE NW or SW (circle one)Lease Name Appelow Well # 1Field Name LodialProducing Formation MississippiElevation: Ground unknown KB _____Total Depth 1190' PBTD _____Amount of Surface Pipe Set and Cemented at 20 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 1145'feet depth to surface w/ 155 sx cmt.Drilling Fluid Management Plan Alt. 2, 4-28-98 v.c.
(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 Rng. E/W

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 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 James D. LorenzTitle owner Date 12-9-97Subscribed and sworn to before me this 9 day of December, 19 97.Notary Public Christine D. StaffordCommission Expires June 25, 1999

CHRISTINE D. STAFFORD
My Appt. Exp. 6-25-99

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) IS

Y903

93676

SIDE TWO

Operator Name Jim Lorenz Lease Name Appelow Well # 1
 Sec. 15 Twp. 29 Rge. 15 ☒ East ☐ West
 County Wilson

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 ☐ 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:

G.R. Neutron

☒ Log Formation (Top), Depth and Datums ☐ Sample
 Name Top Datum

see attached

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"	8 5/8"		20'	Portland	5	
Production	6 3/4"	4 1/2"		1145'	50/50 Poz	131	
					OWC	24	

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
1	1102' - 1112'	50 gal acid	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	1122		
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)			
waiting for SWD				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity
	3	0	50	

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) _____

1102-1112'