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KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION WELL COMPLETION FORM

KCC MICHITA WELL HISTORY - DE Form ACO-1 Septem

WELL HISTORY - DESCRIPTION OF WELL & LEASE Form ACO-1 September 1999 Form Must Be Typed

| Operator: License #5150 | API No. 15- 125-30,006 |
|---|--|
| Name:COLT ENERGY, INC | County: MONTGOMERY |
| Address: P. O. BOX 388 | SENENWSec23 Twp32S. R16X_EW |
| City/State/Zip:IOLA, KS 66749 | 4290 feet from S Line of Section |
| Purchaser: ONEOK | 2970 feet from E Line of Section |
| Operator Contact Person :DENNIS KERSHNER | Footages Calculated from Nearest Outside Section Corner: |
| Phone: (316 365-3111 | Circle one <u>SE</u> |
| Contractor: Name: _MCPHERSON DRILLING, LLC | Lease Name:MUELLER Well #: 2 |
| License: 5675 | Field Name:BREWSTEN |
| Wellsite Geologist:JIM STEGMAN | Producing Formation:MISSISSIPPI LIME |
| Designate Type Of Completion: | Elevation : Ground:UNKNOWN Kelly Bushing: |
| X_New WellReEntryWorkover | Total Depth: _1105 Plug Back Total Depth: _1079.35 |
| OilSWDSIOWTemp Abd | Amount of Surface Pipe Set and Cemented at21.7Feet |
| X_ Gas ENHR SIGW | Multiple Staging Cementing Collar Used? Yes X No |
| Dry Other (Core, WSW, Expl., Cathodic,etc) | If yes, show depth set Feet |
| If Workover/Re-entry: Old Well Info as follows: | If Alternate II Completion, cement circulated from1105 |
| Operator: | feet depth to _SURFACEw/_120sx cement |
| Well Name: | |
| Original Comp. Date:Original Total Depth: | Drilling Fluid Management Plan(Data Collected From Pit) |
| DeepeningRe-perfConv: to Entr/SWD | Chloride Content_1000ppm Fluid Volune80bbls |
| Plug Back Plug Back Total Depth | Dewatering method usedPUMPED OUT PUSH IN |
| Commingled Docket No | Location of fluid disposal if hauled offsite: |
| Dual Completion | Operator Name: |
| Other (SWD or Entr.?) Docket No | Lease Name: License No.: |
| | Ouarter Sec Twp S R E W |
| 4-27-015-24-017-19-01 | County: Docket No.: |
| Spud Date or Date Reached TD Completion Date or | |
| Completion Date Recompletion Date | |
| INSTRUCTIONS: An original and two copies of this form shall be filed with Wichita, Kansas 67202, within 120 days of the spud date, recompletion, wapply. Information of side two of this form will be held confidential for a p (see rule 82-3-107 for confidentiality in excess of 12 months). One copy of form. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit abandoned wells. | orkover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 oeriod of 12 months if requested in writing and submitted with this form fall wireline logs and geologist well reports shall be attached with this |
| 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 Osmi Leistone | |
| Signature. | KCC Office Use Only |
| Fitle: OFFICE MANAGER 20-2-01 | Letter of Confidentiality Attached |
| 1 Sept. | If Denied, Yes Date Wireline Log Received |
| Subscribed and sworn to before me this | Geologist Report Received UIC Distribution |
| | |
| ary Public: Shirley Ostation | &\ |
| Date Commission Expires: 1-10-400 V | |

SIDE TWO

| Operator Name Sec. 23 Twp. | ator NameCOLT ENERGY, INC | | | | Lea Co | Lease NameMUELLERWell County MONTGOMERY | | | | | 2 | | |
|--|--|---------------------------|---------------------------------------|---------------------------------|--|--|---|---------------------------------------|--|------------------------------------|-----------------------|----------------------------|--|
| INSTRUCTIONS: interval tested, time bottom hole temper Attach copy of all F | Show ime tool ope | nportant to n and clos | ps and ba ed, flowir y, and flo | se of forming and show rates in | mations particularies of the matricular matr | penetra essures, urface t | ted. Deta whether test, along | il all cor shut-in p g with fir | res. Report all fina pressure reached st mal chart(s). Attac | al copies of driitatic level, hydr | ll stems to | tests giving pressures, | |
| Drill Stem Tests TakenYesXNo (Attach Additional Sheets) | | | | | | Log Formation (Top), Depth and Datum Sample Name Top Datum SEE ATTACHED DRILLERS LOG | | | | | | | |
| Samples Sent to Geological SurveyX_YesNo Cores TakenYesX_No Electric Log RunX_YesNo (Submit Copy) List All E. Logs Run: | | | | | | | | | | | | | |
| | | 7 | Danaet all | | | | _X_NEV | | USED te, production, etc | | , , | , | |
| Purpose of string | | | ing Set | Weight Lbs/Ft | | Setting Depth | | Type Of Cement | # Sacks Used Type and P | | d Percent dditives | | |
| SURFACE | 11 1/4 | 11 1/4 8 5/8 | | | 35 | | 21.7 | | PORTLAND | 4SXS | | | |
| PRODUCTION | 6 3/4 | | 4 1/2 | | | | 1079.35 | | PORTLAND A | 120SXS | | | |
| | | | | | | | | | | | | | |
| | | | | ADDIT | IONAL C | EMEN'I | TING/SQU | EEZE RE | CORD | | | | |
| Purpose: Depth Ty Perforate Top Bottom Protect Casing | | Type of | of Cement #Sac | | ks Used | Type and Percent Additives | | | | | | | |
| Shots Per/F | Shots Per/F 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 | | | | | | |
| OPEN HOLE 1078-1105 | | | | | | | 500GAL HCL 1078- | | | | | | |
| | | | | | | | | | | | | 1105 | |
| | | | | | | | | 4 | | | | | |
| TUBING RECORD | | Set | t At | | Pack | er At | ALC: V | Line | r Run | Yes | No | | |
| Date of First Production 7-28-01 Producing Method: Flowing X Pumping Gas Lift | | | | | | | | | | | | | |
| Estimated Production/24hrs Oil Bbls Gas Mcf.2 | | | | | A second | | | Gravity | | | | | |
| Dispostion Of Gas METHOD OF COMPLETION Production Interval 1078-1105 Vented X Sold Used on Lease X Open Hole Perf. Dually Compl. Commingled (If vented Submit ACO-18)Other (Specify) | | | | | | | | | | | | | |