

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

Operator: License # 31553Name: UNI Exploration INC.Address 209 N. FryCity/State/Zip Yates Center, KS 66783

Purchaser: _____

Operator Contact Person: Loren SmithPhone (316) 485-5290Contractor: Name: Jeff Kephart DrillingLicense: 5379

Wellsite Geologist: _____

Designate Type of Completion
☒ New Well ☐ Re-Entry ☐ Workover

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> SLOW	<input type="checkbox"/> Temp. Abd.
<input checked="" type="checkbox"/> Gas	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGW	
<input type="checkbox"/> Dry	<input type="checkbox"/> Other (Core, WSW, Expl., Cathodic, etc)		

If Workover:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

<input type="checkbox"/> Deepening	<input type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to Inj/SWD
<input type="checkbox"/> Plug Back		PBTD
<input type="checkbox"/> Combingled	Docket No.	
<input type="checkbox"/> Dual Completion	Docket No.	
<input type="checkbox"/> Other (SWD or Inj?)	Docket No.	

<u>6-3-98</u>	<u>6-3-98</u>
Spud Date	Completion Date
Date Reached TD	

API NO. 15- 099-23096000 **ORIGINAL**County LabetteSW - NW - SW - NE Sec. 3 Twp. 32 Rge. 213440 Feet from S/N (circle one) Line of Section2380 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name Getman Well # 7Field Name GetmanProducing Formation Mississippian

Elevation: Ground _____

Total Depth 460'

Amount of Surface Pipe Set and Cemented at _____ Ft.

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set _____ Ft.

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cl

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ b

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Mark
- 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
12 months if requested in writing and submitted with the form (see rule 82-3-107 for confidentiality in excess of
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 Catherine CarlsonTitle Secretary Date 9-24-98Subscribed and sworn to before me this 24 day of September,
1998.Notary Public Linda M. CallDate Commission Expires 9-3-2001

K.C.C. OFFICE USE ONLY

F	<input type="checkbox"/> Letter of Confidentiality Attached
C	<input type="checkbox"/> Wireline Log Received
C	<input type="checkbox"/> Geologist Report Received

<input checked="" type="checkbox"/> KCC	<input type="checkbox"/> SWD/Rep	<input checked="" type="checkbox"/> NGPA
<input type="checkbox"/> KGS	<input type="checkbox"/> Plug	<input type="checkbox"/> Other

(Specify)