

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

Operator: License # 32853
Name: Bobbi Jo Smith
Address: 5501 Nw 124th Terrace
City/State/Zip: Oswego Ks, 67356
Purchaser: Guardian Energy Consultants, INC.
Operator Contact Person: Loren Smith
Phone: (620) 827-6264
Contractor: Name: Loren Smith
License: 8462
Wellsite Geologist: Loren Smith

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: Bobbi Smith
Well Name: Czapanski #2
Original Comp. Date: October 3 Original Total Depth: 340 Feet
☐ 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. ☐

<u>October 3 2001</u>	<u>February 13 2002</u>	<u>February 13 2002</u>
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 099-19056-00-01
County: Labbette
Ne Nw Ne Se Sec. 8 Twp. 32 S. R. 21 ☒ East ☐ West
2470 feet from S / N (circle one) Line of Section
750 feet from E / W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Czapanski Well #: 2
Field Name: Un
Producing Formation: Bartlesville
Elevation: Ground: 835 Kelly Bushing: 3 Foot
Total Depth: 340 Plug Back Total Depth: None
Amount of Surface Pipe Set and Cemented at 21 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from Bottom to Top
feet depth to 340 Top w/ 23 sx cmt.

Drilling Fluid Management Plan

(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.: 32853
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: Bobbi Jo Smith
Title: Owner Date: 3/15/02
Subscribed and sworn to before me this 15th day of March, 2002
Notary Public: Dorothy A. Smith
Date Commission Expires: 03-19-2002

KCC Office Use ONLY

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

NOTARY PUBLIC - State of Kansas
DOROTHY A. SMITH
My Appt. Expires 03-19-2002

Operator Name: Bobbi Jo Smith Lease Name: Czapanski Well #: 2
 Sec. 8 Twp. 32 S. R. 21 ☒ East ☐ West County: Labbette

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 ☐ 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:

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

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
Oil	6 1/8	7 Inch	10 pounds	21 Feet	Monach	3	None

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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

TUBING RECORD	Size 2 7/8	Set At 320	Packer At 320	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input checked="" type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. 1	Gas Mcf 17000	Water Bbls.	Gas-Oil Ratio 26

Disposition of Gas

METHOD OF COMPLETION

Production Interval

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

☒ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify)