

KANSAS DRILLERS LOG

S. 33 T. 33 R. 11 ^E/_W
Loc. 500' NSL & 100' EWL SW SW
County Chautauqua

API No. 15 — 019 — 20,752
County Number

Operator
McCann Drilling, Inc.

Address
131 East Main Sedan, Kansas 67361

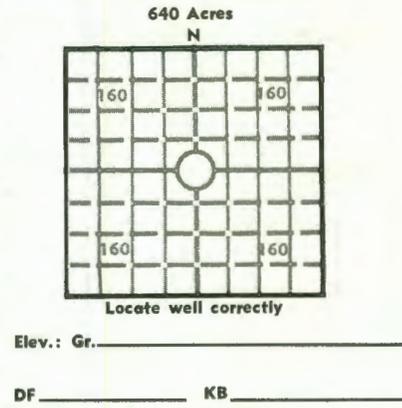
Well No. #1 Lease Name Doty

Footage Location
feet from (N) (S) line _____ feet from (E) (W) line _____

Principal Contractor _____ Geologist _____

Spud Date _____ Total Depth _____ P.B.T.D. _____

Date Completed _____ Oil Purchaser _____



CASING RECORD

Report of all strings set — surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	9 1/2 in	7		50	Portland	10	3%
Production	6 1/4	4 1/2		1304	cu. Cement	165	

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
			1 shot Perft		1248 to 1257

Size	Setting depth	Packer set at
2	1258	

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
7500 lb sand + 225 BBL Salt Water	1248 to 1257

INITIAL PRODUCTION

Date of first production <u>3-27-77</u>		Producing method (flowing, pumping, gas lift, etc.) <u>Surge</u>		
RATE OF PRODUCTION PER 24 HOURS	Oil <u>12 BBL</u> bbls.	Gas <u>50</u>	Water <u>50 BBL</u> bbls.	Gas-oil ratio CFPB
Disposition of gas (vented, used on lease or sold)			Producing interval (s) <u>1248 to 1257</u>	

INSTRUCTIONS: As provided in KCC Rule 82-2-125, within 90 days after completion of a well, one completed copy of this Drillers Log shall be transmitted to the State Geological Survey of Kansas, 4150 Monroe Street, Wichita, Kansas 67209. Copies of this form are available from the Conservation Division, State Corporation Commission, 3830 So. Meridian (P.O. Box 17027), Wichita, Kansas 66217. Phone AC 316-522-2206. If confidential custody is desired, please note Rule 82-2-125. Drillers Logs will be on open file in the Oil and Gas Division, State Geological Survey of Kansas, Lawrence, Kansas 66044.

Operator _____ DESIGNATE TYPE OF COMP.: OIL, GAS, DRY HOLE, SWDW, ETC.:

Well No. _____ Lease Name _____

S _____ T _____ R _____ E _____ W _____

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

Date Received _____	Signature _____ Title _____ Date _____
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33-33-11E

525614

