FORM MUST BE THOSE	0) \/
STATE CORPORATION COMMISSION OF KANSAS	APT NO. 15- 019-22,365 000/
OIL & GAS CONSERVATION DIVISION	CHAUTAUQUA
WELL COMPLETION FORM ACO-1 WELL HISTORY DESCRIPTION OF WELL AND LEASE	
Operator: License #3234	
Name: URANUS, INC.	990 Feet from S/N (circle one) Line of Section
Address 800 WEST 47TH STREET,	Feet from E)W (circle one) Line of Section
SUITE 318	Footages Calculated from Nearest Outside Section Corner: NE, (SE,)NW, or SW (circle one)
	Lease Name <u>BALLARD</u> Well # <u>D-5</u>
City/State/Zip KANSAS CITY ,MD 64112	Field Name FRASIER
Purchaser: PERU-HALE PIPELINE SYSTEM	Producing Formation MULKY COAL / SUMMIT COAL
Operator Contact Person: MITCHELL HERL	999
Phone (816) 531-0202	
Contractor: Name: DSAGE DRILLING INC.	Total Depth 1803 PBTD 1650
License: NA	Amount of Surface Pipe Set and Cemented at91Feet
Nellsite Geologist: NA	Multiple Stage Cementing Collar Used? YesXXNo
Designate Type of Completion	If yes, show depth set NA Feet
·	If Alternate II completion, cement circulated from NA
XX GasENHR SIGW	feet depth to NA w/ NA sx cmt.
Dry Other (Core, WSW, Expl., Cathodic, etc)	Drilling Fluid Management Plan 12-14-52 DW
lf Workover/Re—Entry: old well info as follows:	(Data must be collected from the Reserve Pit)
Operator: DSAGE DRILLING INC.	Chloride contentppm Fluid volumebbls
Well Name:D-5	Dewatering method used
Comp. Date 1/12/81_Old Total Depth1803	Location of fluid disposal if hauled offsite:
Deepening XX Re-perf Conv. to Ini/SWD	cooking of half disposal if indued offsite:
X Plug Back 1650 PBTD Commingled Docket No.	Operator Name
Dual Completion Docket NoOther (SWD or Inj.?) Docket No	Lease NameLicense No.
	Quarter Sec Twp S Rng E/W
1-9-81	County Docket No
- Completion odde	1
of damaning, michild, Nansas 0/202, Within 1/1) dave of	be filed with the Kansas Corporation Commission, 200 Colorado the spud date, recompletion, workover or conversion of a well
minutes of the contraction of th	On side two of this form will be held (d1) for or to to be
The state of the s	- IOPPO (#86 Pula 92 - 3 - 107 faa aa-Bul
MUST BE ATTACHED. Submit CP-4 form with all plugged we	port shall be attached with this form. ALL CEMEMTING TICKETS ells. Submit CP-111 form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promulg vith and the statements herein are complete and correct to the bes	gated to regiate the oil and gas industry have been fully complied
Withall 96-8	
signature	K.C.C. OFFICE USE ONLY FLetter of Confidentiality Attached
	CWireline Log Received
Subscribed and sworn to before me this 7th day of December 19	Distribution
lotary Public 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MGC SUM /D WAS DED & S
Date Commission Expires 8-3-9 STEPHEN E. ALLEE	KGS Plug Other (Specify)
Notary Public - State of Kans	385
My Appl. Expires 8-3-9	3 ansas

Operator Name UF	RANUS, INC.		Lease Nam	ie <u>B</u> A	LLARD	Well #	D-5	
Sec. 19 Twp. 335	Rge. 13	Eost West	County	CHAUTA	AUQUA			
mitervol tested, tir	ne tool open d s, bottom hole	ops and base of form and closed, flowing temperature, fluid rea of log.	and shut—in pr	ASSUIFAS W	hether shut—i	n prescure r	eached static leve	
Drill Stem Tests Taken (Attach Additional si	neets.)	Yes X No	X Log	Fo	ormation (Top),	Depth and Dat	ums Somple	
Samples Sent to Geolo	gical Survey	Yes X No						
Cores Taken		O Yes O No	Name		Тор	Datum		
Electric Log Run (Submit Copy.)		X Yes No	I SUMMIT	СПАЬ	1334	-346		
List All E. Logs Run:			MULKY		1361	-373		
SEE PREVIOUS LOG	S SUBMITED	WITH ORIGINAL AC	0-1					
[Report all st	CASING RECORD	New U	sed 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			1	91 '	 		NA NA	
	C SE	E ACO-1 FILED 1-8	<u>1</u>		<u> </u>			
<u> </u>	1		† 	 	1	1		
		ADDITIONAL CEI	MENTING/SQUEEZE	RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives				
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				
2	1361-1369, 3 1/8 DML HSC			15000# SAND,260BBLS,40 LB 1361-136				
				GEL,CITY WATER				
3	1334-1340 3 1/8 DML HSC			15000# SAND,300BBLS,20/40 SAND 1334-1340 GEL,CITY WATER				
THEIRC RECORD								
TUBING RECORD	Size 2*	Set At 1200	Packer At	Liner Run	☐ _{Yes}	X No	·	
Date of First, Resumed	Production, SWD	or Inj. Produc	ing Method D	Flowing 🛛 P	umping Gas	Lift Other	(Explain)	
Estimated Production per 24 Hours	Oil 0	Bbis. Gas	Mcf Wate		Gas	Oil Ratio	Gravity	
Disposition of Gas: Vented Sold	Used on Leas		THOD OF COMPLET	ION : 1 1			Production Interval 1334–1340 1361–1369	
(If Vented, submit	ACO-18.)			. 46.2		h vit	1301-1307	