

FORM MUST BE TYPED

SIDE ONE

125-29657

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

API NO. 15- \_\_\_\_\_  
County Montgomery  
SW - NW - SW - \_\_\_\_\_ Sec. 35 Twp. 33 Rge. 13  E  W

Operator: License # 30093

1650 Feet from  N (circle one) Line of Section

Name: Dark Treasures Oil & Gas

330 Feet from  E (circle one) Line of Section

Address R. R. 2, Box 73

Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or  SW (circle one)

Address Elk City,

Lease Name Pendelton Well # 1-A

City/State/Zip Kansas 67344

Field Name Havana

Purchaser: Chautauqua Co. Gas Devel.

Producing Formation Mulky Coal

Operator Contact Person: Andy Park

Elevation: Ground 776 KB \_\_\_\_\_

Phone (316) 673-8231

Total Depth 1183 PSTD \_\_\_\_\_

Contractor: Name: Finney Drilling

Amount of Surface Pipe Set and Cemented at 40 Feet

License: 5989

Multiple Stage Cementing Collar Used? \_\_\_\_\_ Yes  No

Wellsite Geologist: Andy Park

If yes, show depth set \_\_\_\_\_ Feet

Designate Type of Completion  
 New Well \_\_\_\_\_ Re-Entry \_\_\_\_\_ Workover

If Alternate II completion, cement circulated from \_\_\_\_\_

Oil \_\_\_\_\_ SWD \_\_\_\_\_ SIOW \_\_\_\_\_ Temp. Abd.  
\_\_\_\_\_ Gas \_\_\_\_\_ EMHR \_\_\_\_\_ SIGW \_\_\_\_\_  
\_\_\_\_\_ Dry \_\_\_\_\_ Other (Core, WSW, Expl., Cathodic, etc)

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cat.

If Workover/Re-Entry: old well info as follows:

Drilling Fluid Management Plan 12-28-92  
(Data must be collected from the Reserve Pit)

Operator: \_\_\_\_\_

Fresh water - no mud mixed

Well Name: \_\_\_\_\_

Chloride content \_\_\_\_\_ ppm Fluid volume 240 bbls

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Dewatering method used \_\_\_\_\_

\_\_\_\_\_ Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ Conv. to Inj/SWD  
\_\_\_\_\_ Plug Back \_\_\_\_\_ PSTD  
\_\_\_\_\_ Commingled \_\_\_\_\_ Decket No. \_\_\_\_\_  
\_\_\_\_\_ Dual Completion \_\_\_\_\_ Decket No. \_\_\_\_\_  
\_\_\_\_\_ Other (SWD or Inj?) \_\_\_\_\_ Decket No. \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

8-31-92 9-3-92 10-2-92

Operator Name \_\_\_\_\_

Spud Date Date Reached TD Completion Date

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

\_\_\_\_\_ Quarter Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 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 \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Notary Public \_\_\_\_\_

Date Commission Expires \_\_\_\_\_

K.C.C. OFFICE USE ONLY  
F \_\_\_\_\_ Letter of Confidentiality Attached  
C \_\_\_\_\_ Wireline Log Received  
C \_\_\_\_\_ Geologist Report Received  
Distribution  
 KCC \_\_\_\_\_ SWD/Rep  
 KGS \_\_\_\_\_ Plug  
RECEIVED  
COMMISSION  
(Specify)  
DEC 14 1992

23409  
SIDE TWO

Operator Name Dark Treasures Oil & Gas Lease Name Pendelton Well # 1-A

Sec. 35 Twp. 33 Rge. 13  East  West  
County Montgomery

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Drum Lm.	576	583
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lenape Lm.	742	750
List All E.Logs Run:		Altamont Lm.	814	846
		Oswago Lm.	1060	1148
		Mulky Coal Seam	1130	1138

CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> 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
Surface	8 3/4	7.25	22	41.60	Portland	5	
Production	6 1/8	2 7/8	6.5	1178	Portland	120	

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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)	
		Amount	Depth
Two	1130 to 1138	1000 gal. 15% Hcl	
		20,000 lbs, -20-40- sand	

TUBING RECORD		Size Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		pump with one inch pipe			
Date of First, Resumed Production, SMD or Inj.		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
10-6-92					
Estimated Production Per 24 Hours	Oil Bbls.	Gas 30 Mcf	Water 10 Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas:  Vented  Sold  Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval: 1130-1138