

8218

7-33-18E

15-099-22988

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

COPY

API NO. 15- _____

County LABETTE

SW NW SE _____ Sec. 07 Twp. 33 Rge. 18

1485 Feet from S (circle one) Line of Section

2320 Feet from E (circle one) Line of Section

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

Lease Name VIRGINIA WHEELER Well # 11

Field Name PRICE

Producing Formation BARTLESVILLE

Elevation: Ground N/A KB _____

Total Depth 643 PBDT _____

Amount of Surface Pipe Set and Cemented at 20 Ft

Multiple Stage Cementing Collar Used? Yes XX

If yes, show depth set _____ Ft

If Alternate II completion, cement circulated from 643

feet depth to SURFACE w/ 105 sx cu

Drilling Fluid Management Plan 2-1-88
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bt

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

Operator: License # 7208

Name: LORAIN CLEAVER

Address ROUTE # 2

COLONY, KANSAS 66015

City/State/Zip COLONY, KANSAS 66015

Purchaser: _____

Operator Contact Person: LORAIN CLEAVER

Phone (316) 365-2515

Contractor: Name: BLACK DIAMOND DRILLING

License: 6056

Wellsite Geologist: NONE

Designate Type of Completion
XX New Well _____ Re-Entry _____ Workover _____

XX Oil _____ SWD X SIOW _____ Temp. Abd. _____

_____ Gas _____ ENHR _____ SIGW _____

_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

_____ Deepening _____ Re-perf. _____ Conv. to SWD _____

_____ Plug Back _____ PBDT _____

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

_____ Other (SWD or Inj?) _____ Docket No. _____

10/28/92 11/06/92 11/06/92

Spud Date Date Reached TD Completion Date

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 Lorain Cleaver

Title OWNER Date 1/13/93

Subscribed and sworn to before me this 13th day of JANUARY 19 93

Notary Public Martha L. Cleaver

Date Commission Expires 04/16/94

A MARTHA L. CLEAVER
Notary Public - State of Kansas

K.C.C. OFFICE USE ONLY		
F	_____	Letter of Confidentiality Attached
C	_____	Wireline Log Received
C	_____	Geologist Report Received
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/>	KGS	<input type="checkbox"/> Plug
<input type="checkbox"/>		<input checked="" type="checkbox"/> NGPA
		<input type="checkbox"/> Other (Specify)

Operator Name LORAIN CLEAVER Lease Name VIRGINIA WHEELER Well # _____

Sec. 07 Twp. 33 Rge. 18 East West
 County LABETTE

7-33-18 COPY

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	SOIL & CLAY	0	14
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	LIME	180	307
List All E.Logs Run:		BLACK SHALE	415	424
ATTACHED DRILLERS LOG		SHALE	465	579
SEATING NIPPLE @ 588		SAND NO ODOR	579	591
CORE @ 584-603		GOOD OIL SAND	591	605
TOTAL DEPTH @ 643		SAND W/ NO OIL	605	609
		SHALE	609	643 T.D.

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
SURFACE	9'	6 1/2		20	PORTLAND	6	PORTLAND 60/40 po 2% GEL
PRODUCTION	5 7/8	2 7/8		639	PORTLAND		portland 60/40 po 5% SALJ

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
	** VIRGINIA WHEELER # 11**		
	WELL WAS DRILLED AND CEMENTED		
	TO THE TOP, HAS NOT BEEN LOGGED		
	AND PERFORATED.***		

TUBING RECORD

Size	Set At	Packer At	Liner Run
			<input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. _____ Producing Method Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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

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

Production Interval: _____

ORIGINAL

SIDE ONE

FORM MUST BE TYPED

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

Operator: License # # 7208

Name: LORAIN CLEAVER

Address ROUTE # 2

COLONY, KANSAS

City/State/Zip 66015

Purchaser: EOTT ENERGY

Operator Contact Person: BETTY THORNHILL

Phone () 316-365-2515

Contractor: Name: BLACK DIAMOND DRILLING

License: # 6056

Wellsite Geologist: NONE

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD S10W Temp. Abd.

Gas ENHR S1GW

Dry Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: _____

Well Name: _____

Comp. Date was TA'd Old Total Depth 643'

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PSTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

9-3-96 9-4-96 9/4/96
Spud Date Date Reached TD Completion Date

entry

API NO. 15- # 15-099-22,988

County LABETTE

SW-SW-NW-SE Sec. 07 Twp. 33 Rge. 18E E E V

1485 Feet from (3)N (circle one) Line of Section

2320 Feet from (6)W (circle one) Line of Section

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

Lease Name VIRGINIA WHEELER Well # # 11

Field Name PRICE

Producing Formation BARTLESVILLE

Elevation: Ground N/A KB _____

Total Depth 643 PSTD _____

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 643

feet depth to SURFACE w/ 105 sx cat.

Drilling Fluid Management Plan AH. 2, 2-23-98, U.C
(Data must be collected from the Reserve Plat)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter Sec. Twp. S E/W

County _____ Docket No. _____

RECEIVED
KANSAS OIL & GAS COMMISSION
OCT - 3 A : 19

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 C2-3-130, 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 XX Loraine Cleaver
Title OWNER Date 9/23/96

Subscribed and sworn to before me this 23rd day of SEPTEMBER, 1996

Notary Public Betty Thornhill

Date Commission Expires 3/8/98

BETTY THORNHILL
Notary Public - State of Kansas

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NSPA
 KGS Plug Other (Specify) IS

SIDE TWO

Operator Name LORAIN CLEAVER

Lease Name VIRGINIA WHEELER Well # # 11

Sec. 07 Twp. 33 Rge. 18E
 East
 West

County LABETTE

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 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:

DRILLERS REPORT T.D. 643
RADIOACTIVITY LOG
SEATING NIPPLE @ 591'
CORE 584-603

Name	Top	Bottom
SOIL & CLAY	0	14
LIME	180	307
BLACK SHALE	415	424
SHALE	465	579
SAND NO ODOR	579	591
GOOD OIL SAND	591	605
SAND W/NO OIL	605	609
SHALE	609	643 T.D.

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
SURFACE	9'	6 1/2"		20	PORTLAND	6	PORTLAND 6- /40POZ 2% GEL
PRODUCTION	5 7/8"	2 7/8"		639	PORTLAND	105	PORTLAND 60/40POZ 5% SALT

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
16 SHOTS	592' - 603'	550# ROCK SALT 2 ACID SPOTS	
	PERFORATIONS: 2-1/8" ALUM	100 GAL 15% HCL	
	SEATING NIPPLE 591'	350# FRAC GEL	
		80SX 12/20 70SX 8/12	

TUBING RECORD Size 2 7/8 Set At 643 Packer At N/a Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 9/4/96 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours Oil XX Bbls. 1/2 Gas 0 Mcf Water 1/2 Bbls. Gas-Oil Ratio Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

Vented Sold Used on Lease
(If vented, submit ACO-18.)

Open Hole Perf. Dually Comp. Other (Specify)

Completed 592'
603'