

MUST BE TYPED

SIDE ONE

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

COPY

4214

API NO. 15- 099-22,948

County LABETTE

NW - NW - SE - Sec. 26 Twp. 34 Rge. 20 E W

Operator: License # 4870

Name: THOMAS A. LAUTH

Address 1447 PALACE AV.

City/State/Zip ST. PAUL, MN. 55105

Purchaser: NONE

Operator Contact Person: THOMAS A. LAUTH

Phone (612) 699-6409

Contractor: Name: KEPHART DRILLING

License: #5379

Wellsite Geologist: CINDY VAN DYKE

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: N/A

Operator: N/A

Well Name: N/A

Comp. Date N/A Old Total Depth N/A

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

12/10/91 12/12/91 NONE
Spud Date Date Reached TD Completion Date

2310 Feet from (S)N (circle one) Line of Section

2310 Feet from (E)W (circle one) Line of Section

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

Lease Name ROGLE Well # JL# 7

Field Name TOMEY

Producing Formation NONE

Elevation: Ground 904 FT. KB _____

Total Depth 950 FT PBTB _____

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 N/A

feet depth to N/A w/ N/A sx cmt.

Drilling Fluid Management Plan N/A DRILLED WITH
(Data must be collected from the Reserve Pit) AIR
ROTARY

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used _____

Location of STATE CORPORATION COMMISSION Drilled offsite:

Operator Name FEB 05 1992

Lease Name WICHITA, KANSAS License No. _____

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

County _____ Docket No. _____

RECEIVED
STATE CORPORATION COMMISSION
FEB 05 1992
CONSERVATION DIVISION
WICHITA, KANSAS
Alt II Not Done

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 Thomas A. Lauth

Title OPERATOR Date 1/30/92

Subscribed and sworn to before me this 30 day of Jan 1992.

Notary Public Kristin E Carlson

Date Commission Expires April 4 1996

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

NOTE: PREVIOUSLY SUBMITTED ON OBSOLETE ACO-1 FORM (7/89)

Operator Name THOMAS A. LAUTH Lease Name BOGLE Well # JL# 7

Sec. ~~XXX~~ 26 Twp. 34 Rge. 20
 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: NONE

Name	Formation (Top), Depth and Datum		Sample
	Top	Datum	
Bartlesville	345 - 401	+559	
Mississippi Chat	564 - 574	+340	
Mississippi Ls.	574 - 925	+336	
Chattanooga Sh.	925 - 935	-21	
Arbuckle Dol.	935 - 950	-31	

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	8 3/4	7"	15	20	TYPE I PORTLAND	3	NONE
CEMENTED BY KEPHART DRILLING #5379							
N/A							

N/A ADDITIONAL CEMENTING/SQUEEZE RECORD N/A

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	NONE			NONE

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) Dep
NONE		NONE

TUBING RECORD Size Set At Packer At Liner Run Yes No
 NONE ----- NONE

Date of First, Resumed Production, SWD or Inj. Producing Method Flowing Pumping Gas Lift Other (Explain)
 NONE N/A

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	NONE	N/A	N/A	N/A	N/A

Disposition of Gas: N/A **METHOD OF COMPLETION** **NO COMPLETION** **Production Interval**
 Vented Sold Used on Lease (If vented, submit ACO-18.)
 Open Hole Perf. Dually Comp. Commingled
 Other (Specify) _____