

3-35-94  
COPY

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

API NO. 15- 191-22246

County SUMNER

N $\frac{1}{2}$  - SE - NE - NE Sec. 3 Twp. 35S Rng. 2E

840 Foot from S (circle one) Line of Section

330 Foot from W (circle one) Line of Section

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

Lease Name YUST Well # 3

Field Name SOUTH PADGETT

Producing Formation NEVA

Elevation: Ground 1187 KB

Total Depth 826 PSTD 822

Amount of Surface Pipe Set and Cemented at 250.8 Feet

Multiple Stage Cementing Collar Used? Yes  No

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

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

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sz cmt.

Drilling Fluid Management Plan ALT 1 12-2-94  
(Data must be collected from the Reserve Pit)

Chloride content 1400 ppm Fluid volume 1150 bbls

Desaturating method used EVAPORATION

Location of fluid disposal if hauled offsite:

Operator Name TOM KIERNAN

Lease Name YUST License No. 30424

NE Quarter Sec. 3 Twp. 35 S Rng. 2E E/W

County SUMNER Bocket No. \_\_\_\_\_

Operator: License # 30424

Name: TOM KIERNAN

Address P.O. BOX 4058

EDMOND

City/State/Zip OKLAHOMA 73083

Purchaser: ASHTON GAS GATHERING SYSTEM

Operator Contact Person: BILL WATKINS

Phone (316) 584 6435

Contractor: Name: McPHERSON DRILLING CO.

License: 05495

Wellsite Geologist: KEVIN HOWARD

Designate Type of Completion

New Well  Re-Entry  Workover

Oil  SUD  SIOW  Temp. Abd.

Gas  ENHR  SIGW

Dry  Other (Core, MSW, 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 Inj/SUD

Plug Back  PSTD

Casinghead  Bocket No. \_\_\_\_\_

Dual Completion  Bocket No. \_\_\_\_\_

Other (SUD or Inj?) Bocket No. \_\_\_\_\_

3-17-94 3-19-94

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 by the State Corporation Commission 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 Tom Kiernan

Title OPERATOR

Subscribed and sworn to before me this 5th day of JULY 19 94

Notary Public Wanda S. Hampton

Date Commission Expires 3-14-95

STATE CORPORATION COMMISSION  
RECEIVED  
JUL 08 1994  
OIL & GAS CONSERVATION DIVISION  
WICHITA, KANSAS

K.C.C. OFFICE USE ONLY		
<input type="checkbox"/>	Letter of Confidentiality Attached	
<input checked="" type="checkbox"/>	Wireline Log Received	
<input checked="" type="checkbox"/>	Geologist Report Received	
Distribution		
<input checked="" type="checkbox"/>	SUD/Rep	<input type="checkbox"/> NSPA
<input checked="" type="checkbox"/>	Plug	<input type="checkbox"/> Other (Specify)

Operator Name TOM KIERNAN Lease Name YUST Well # 3

Sec. 3 Twp. 35S Rge. 2E

East  
 West

County SUMNER

**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 type="checkbox"/> Log	Formation (Top), Depth and Returns	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Returns
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	NEVA	795	+392
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No			

List All E. Logs Run:

**WILL RUN CASED HOLE CORR. LOG WHEN COMPLETING.**

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 Additive
SURFACE	9 5/8	7"	23#	251	CLASS A	78	2% CACL
PRODUCTION	7 7/8	4 1/2"	10.5#	822	CLASS A	90	2% CA

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additive
<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)	Depth
	SHUT IN GAS WELL, WAITING ON PIPELINE. WILL FILE NEW REPORT AS SOON AS WELL IS COMPLETED, AS WELL AS THE MULTIPOINT BACK PRESSURE TEST FORM CG 1.		

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

Date of First, Resumed Production, SUD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
SEE ABOVE	

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.  Builly Comp.  Cemented  Other (Specify) \_\_\_\_\_

Production Interval: \_\_\_\_\_