

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 3133  
Name: KLM EXPLORATION CO. INC.  
Address: 600 E. LAKE ST.  
City/State/Zip: McLOUTH, KS 66054  
Purchaser: EQUILON ENTERPRISES LLC  
Operator Contact Person: LARRY ALEX  
Phone: (913) 796-6763  
Contractor: Name: KAN-DRILL INC.  
License: 32548  
Wellsite Geologist: LARRY ALEX

Designate Type of Completion:  
 New Well     Re-Entry     Workover  
 Oil     SWD     SLOW     Temp. Abd.  
 Gas     ENHR     SIGW  
 Dry     Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening     Re-perf.     Conv. to Enhr./SWD  
 Plug Back     Plug Back Total Depth  
 Commingled    Docket No. \_\_\_\_\_  
 Dual Completion    Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?)    Docket No. \_\_\_\_\_

<u>5-2-01</u>	<u>5-8-01</u>	<u>5-9-01</u>
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 087-20,690  
County: JEFFERSON  
NE SE NW SE Sec. 28 Twp. 9 S. R. 20  East  West  
1850 FSL feet from S / N (circle one) Line of Section  
1485 FEL feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: ZULE Well #: 16  
Field Name: McLOUTH STORAGE FIELD  
Producing Formation: McLOUTH SANDSTONE  
Elevation: Ground: 1055 Kelly Bushing: -  
Total Depth: 1500 Plug Back Total Depth: 1502  
Amount of Surface Pipe Set and Cemented at 100 FEET Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set --- Feet  
If Alternate II completion, cement circulated from 100 FEET  
feet depth to SURFACE w/ 50 sx cmt.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content Fresh water ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**INSTRUCTIONS:** An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: Larry Alex  
Title: Consultant Date: 8-14-01  
Subscribed and sworn to before me this 14 day of Aug '01  
Notary Public: Herbert Edmonds  
**NOTARY PUBLIC**  
State of Kansas  
Date My not expires: Nov 1 - 2002  
11-1-02

**KCC Office Use ONLY**  
 Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: KLM EXPLORATION CO. INC. Lease Name: ZULE Well #: 16  
 Sec. 28 Twp. 9 S. R. 20  East  West County: JEFFERSON

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:  DUAL COMPENSATED POROSITY LOG DUAL INDUCTION LOG SONIC BOND LOG	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum b KANSAS CITY 748' McLOUTH SANDSTONE 1416' 1434' MISSISSIPPIAN LIME 1443'
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CASING RECORD <input type="checkbox"/> New <input 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	12.25"	8.625"	24#	100'	OWC	45	OWC Cement
PRODUCTION	6.75"	4.5"	10.5#	1491'	50/50 poz m	154	

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)	Depth
4	1428-1434'	3 1/8" HSC	1428-34

TUBING RECORD		Size <u>2 3/8"</u>	Set At <u>1434'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Enhr.			Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)		
Estimated Production Per 24 Hours	Oil Bbls. <u>10</u>	Gas Mcf <u>0</u>	Water Bbls. <u>1</u>	Gas-Oil Ratio	Gravity

Disposition of Gas      METHOD OF COMPLETION      Production Interval

Vented    Sold    Used on Lease    Open Hole    Perf.    Dually Comp.    Commingled \_\_\_\_\_  
*(If vented, Sumit ACO-18.)*       Other (Specify) \_\_\_\_\_