FORM MUST BE TYPED

SIDE ONE 15-065-01740-0001 ORIGINAL

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

Operator: License # 5783

Name: Galloway Drilling Co. Inc.

Address 105 S. Broadway Suite 340

Wichita, Ks 67202

City/State/Zip Wichita, Ks 67202

Purchaser: Texaco Trading & Trans. Inc.

Operator Contact Person: Dale Loomis

Phone (316) 669-7131

Contractor: Name: Murfin

License:

Wellsite Geologist: None

COPY

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

XX Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: Galloway Drilling Co. Inc

Well Name: Bass #7

Comp. Date 6-23-52 Old Total Depth _____

____ Deepening X Re-perf. ____ Conv. to Inj/SWD
X Plug Back 3768' PBTD
____ Commingled Docket No. _____
____ Dual Completion Docket No. _____
____ Other (SWD or Inj?) Docket No. _____

5-2-95 Date of START of WORKOVER | 5-11-95 Date Reached TD | 5-11-95 Completion Date of WORKOVER

API NO. 15- Drilled 5-16-65

County Graham

N/2 - SW - SW - ____ Sec. 12 Twp. 10 Rge. 21W E/W

990 Feet from S/N (circle one) Line of Section

4620 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 Bass Well # #7

Field Name Cooper

Producing Formation KC

Elevation: Ground 2275 KB 2280

Total Depth 3839 PBTD _____

Amount of Surface Pipe Set and Cemented at 157.39 Feet

Multiple Stage Cementing Collar Used? X Yes ____ No

If yes, show depth set 1760' Feet

If Alternate II completion, cement circulated from _____

feet depth to 1760 w/ 440 sx sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

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 Rng. ____ E/W

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 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 President Date 6-27-95

Subscribed and sworn to before me this 27 day of June, 19 95.

Notary Public Barbara L Copeland

Date Commission Expires 4-28-99

BARBARA L. COPELAND
Notary Public - State of Kansas
My Appt. Expires 4-28-99

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Geologist Report Received

Distribution
✓ KCC ____ SWD/Rep ____ NGPA
✓ KGS ____ Plug ✓ Other (Specify)

STATE CORPORATION COMMISSION

Form ACO-1 (7-91)

RECEIVED
JUN 2 8 1995
CONSERVATION DIVISION
WICHITA, KANSAS

SIDE TWO

Operator Name Galloway Drilling Co., Inc. Lease Name Bass Well # 7

Sec. 12 Twp. 10 Rge. 21 ☐ East ☒ West County Graham

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.) ☐ Yes ☒ No

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run (Submit Copy.) ☐ Yes ☒ No

List All E.Logs Run:

☒ Log Formation (Top), Depth and Datums ☐ Sample

Name	Top	Datum
K.C.	3530'	1250

Y90

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

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
2	CIBP @ 3768' 3571-74 7 holes,	1000 gallon 15% NE	
2	3617-20 7 holes	1500 gallon 15% NE	
2	3703-06 7 holes	1500 gallon 15% NE	
2	3721-24 7 holes	1500 gallon 15% NE	

TUBING RECORD Size 2 7/8" Set At 3760 Packer At Liner Run ☐ Yes ☒ No

Date of First, Resumed Production, SWD or Inj. 5-11-95 Producing Method ☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil 5 Bbls.	Gas Mcf	Water 175 Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: METHOD OF COMPLETION Production Interval 3571-3724

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

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled

☐ Other (Specify)