

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

Operator: License # 4767Name: Ritchie Exploration, Inc.Address: 125 N. Market, Suite 1000City/State/Zip: Wichita, KS 67202Purchaser: NCRAOperator Contact Person: Lisa ThimmeschPhone: (316) 267-4375

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

Designate Type of Completion

☐ New Well ☐ Re-Entry ☒ Workover

☒ Oil ☐ SWD ☐ SIGW ☐ Temp. Abd.
☐ Gas ☐ ENHR ☐ SIGW
☐ Dry ☐ Other (Core, VSW, Expl., Cathodic, etc)

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

Operator: Don PrattWell Name: C. Griffith #1-22Comp. Date: 7-83 Old Total Depth: 4035

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

1-22-93 10-27-93
 Spud Date Date Reached TD Completion Date

API NO. 15-

15-065-21,805County: GrahamC N/2 - NW - Sec. 22 Twp. 10 Rge. 23W440 Feet from S/N (circle one) Line of Section1320 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name: Griffith "P" Well # 1

Field Name: _____

Producing Formation: L/KCElevation: Ground 2376 KB hucTotal Depth: 4030' PSTD FEB 9

Amount of Surface Pipe Set and Cemented at _____

Multiple Stage Cementing Collar Used? ☒ Yes ☐ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan CB 5-31-94
(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: MAY 24 1995

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, 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.

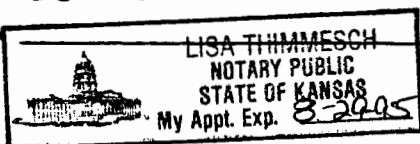
All requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Signature: _____

Title: PresidentDate: 2/2/94Subscribed and sworn to before me this 7th day of February, 19 94.

Notary Public: _____

Date Commission Expires: _____



K.C.C. OFFICE USE ONLY
☒ Letter of Confidentiality Attached
☐ Wireline Log Received
☐ Geologist Report Received

Distribution
☒ KCC ☐ SWD/Rep ☐ KGPA
☒ KGS ☐ Plug ☐ Other (Specify) IS

Form ACO-1 (7-91)

WES-01-66

SIDE TWO

76671

Operator Name Ritchie Exploration, Inc. Lease Name Griffith "P" Well # 1
County Graham
Sec. 22 Twp. 10S Rge. 23W
☐ East
☐ West

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 l, 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 Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<i>N/A</i>		
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

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

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	Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
3	3846'-3848' "J" zone	500 gal 15% NE	I & J zones
3	3830'-3834' "I" zone	1500 gal 15% NE	E, F, & G zones
3	3770'-3775' "G" zone		
3	3756'-3760' "F" zone		
3	3745'-3749' "E" zone		

TUBING RECORD	Size <u>2 3/8"</u>	Set At <u>4014'</u>	Packer At <u>NA</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	<u>10-27-93</u>	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 <u>2.18</u> Bbls.	Gas <u>60.22</u> Mcf	Water <u>60.22</u> Bbls.	Gas-Oil Ratio <u> </u> Gravity <u> </u>

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) <u> </u>	<u> </u>