

5-10-24w

COP

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: MobilOperator Contact Person: A. Scott Ritchie IIIPhone (316) 267-4375

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

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:

Operator: Don PrattWell Name: DenioComp. Date 5-77 Old Total Depth 4116'

____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PSTD
____ Commingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Inj?) ____ Docket No. ____
☒ Squeeze
II-18-92 12-2-92

Spud Date _____ Date Reached TD _____ Completion Date _____

API NO. 15- 15-065-20,903 0001County GrahamC - NW/4 - Sec. 5 Twp. 10 Rge. 24W E1320 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 Denio "P" Well # 1Field Name Riedel ext.Producing Formation L/KC

Elevation: Ground _____ KB _____

Total Depth 4085' PSTD _____

Amount of Surface Pipe Set and Cemented at _____ 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/ _____ sx cmt.

Drilling Fluid Management Plan 3-1-13
(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 FROM CONFIDENTIAL

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

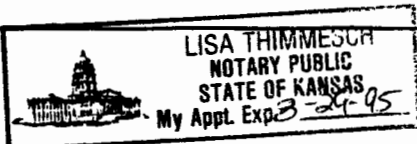
County _____ Docket No. _____

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 [Signature]Title President Date 2-11-93Subscribed and sworn to before me this 11th day of February, 19 93.Notary Public Lisa Thimmesch

Date Commission Expires _____



K.C.C. OFFICE USE ONLY	
F	<input checked="" type="checkbox"/> Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/> Wireline Log Received
C	<input checked="" type="checkbox"/> Geologist Report Received
Distribution	
<input checked="" type="checkbox"/> KCC	<input checked="" type="checkbox"/> SWD/Rep
<input checked="" type="checkbox"/> KGS	<input checked="" type="checkbox"/> Plug
Other <input checked="" type="checkbox"/> NEPA <input checked="" type="checkbox"/> Other <input checked="" type="checkbox"/>	

RECEIVED
STATE CORPORATION COMMISSION
153 1 2 1993
CONSERVATION DIVISION
Wichita, Kansas

Operator Name Ritchie Exploration, Inc. Lease Name Denio "P" Well # I
 Sec. 5 Twp. 10 Rge. 24W ☐ East ☐ West
 County Graham

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests including interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static pressure, 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:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

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
<input checked="" type="checkbox"/> Perforate	2836'-			
<input checked="" type="checkbox"/> Protect Casing	2438'-	60/40 poz	250	2% calcium chloride
<input type="checkbox"/> Plug Back TD	1764'-	60/40 poz	250	2% calcium chloride
<input type="checkbox"/> Plug Off Zone	1795'			

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

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8"	4070'	na		
Date of First, Resumed Production, SWD or Inj.	12-2-92	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. 5.00	Gas Mcf 0	Water Bbls. 1.00	Gas-Oil Ratio	Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

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

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____