

19-1-3164 COPY

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

Operator: License # 6931

Name: Bowman Oil Company

Address Box 17

Codell, Kansas 67630

City/State/Zip

Purchaser: Farmland

Operator Contact Person: Paul Bowman

Phone (913) 434-2304

Contractor: Name: Emphasis Drilling

License: 8241

Wellsite Geologist: Mike Davignon

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

8/27/91 9/16/91 11/5/91
Spud Date Date Reached TD Completion Date

API NO. 15- 063-21404

County GOV

C SW NW Sec. 19 Twp. 11 Rge. 31 X E

3300 Feet from S/N (circle one) Line of Section

4950 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 Keller Well # 1

Field Name _____

Producing Formation Marmaton

Elevation: Ground 2950 KB _____

Total Depth 4610 PBTB 4610

Amount of Surface Pipe Set and Cemented at 257 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set 2450 Feet

If Alternate II completion, cement circulated from Surface

feet depth to 2450 w/ 350 ex cmt.

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

Chloride content 4500 ppm Fluid volume 650 bbls

Dewatering method used let rvaporate & backfill

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, 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 Louis J. Bowman
Title Partner Date 5/15/92

Subscribed and sworn to before me this 15th day of May 1992.

Notary Public Vesta J. Russell

Date Commission Expires 7-17-92



K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
KCC _____ RECEIVED NGRON
KGS _____ STATE CORPORATION COMMISSION Other (Specify)
MAY 18 1992

WIC-1181

SIDE TWO

100175

Operator Name Bowman Oil Company

Lease Name Keller

Well # 1

Sec. 19 Twp. 11 Rge. 31

East
 West

County Gove

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 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 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:

Great Guns Dual Compensated porosity log

Log	Formation (Top), Depth and Datum	Sample
Name	Top	Datum
Heebner	3834	
Top	3963	
Lans	3976	
B-KC	4257	
Marm	4287	
Pawn	4376	
Ft Scott	4420	
Cher	4468	
Miss	4563	

CASING RECORD <input checked="" 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 1/4	8 5/8	20	257	Common	190	
Production	7 7/8	4 1/2	9.5	4610	Common	190	

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input checked="" type="checkbox"/> Protect Casing	0-2450	Hell light	250	85# flocele, 2% gal
<input type="checkbox"/> Plug Back TD		pozmix	35	
<input type="checkbox"/> Plug Off Zone		Standard	65	

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
4	4287-4292	3000 gal 15% HCl

TUBING RECORD		Size	Set At	Packer At	Liner Run				
		2 3/8"	3590			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Date of First, Resumed Production, SWD or Inj.				Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
11/5/91									
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls.	Gas-Oil Ratio	Gray	
	1 1/4				5bbl				

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____