

7-11-33W

FORM MUST BE TYPED

SIDE ONE

And

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

API NO. 15- 109-20,536 AUG 19
County Logan **CONFIDENTIAL**
150' E of C
SW SE SE Sec. 7 Twp. 11S Rng. 33 X E
V

Operator: License # 3988

330' Feet from (S) (circle one) Line of Section
840' Feet from (E) (circle one) Line of Section

Name: Slawson Exploration Company, Inc.

Address 621 N. Robinson, Suite 490

Footages Calculated from Nearest Outside Section Corner:
NE, (SE) NW or SW (circle one)

City/State/Zip Oklahoma City, OK 73102-6217

Lease name Nollette AB Well # #1

Purchaser: _____

Field name Monument

Operator Contact Person: Steve Slawson

Producing formation LKC/ Mississippi

Phone (800) 333-5493

Elevation: Ground 3181' KB 3187'

Contractor: Name: Abercrombie RTD, Inc.

Total Depth 4805' PSTD _____

License: 30684

Amount of Surface Pipe Set and Cemented at 406' Feet

Wellsite Geologist: George Mueller

Multiple Stage Cementing Collar Used? Yes X No _____

Designate Type of Completion
 New Well Re-Entry Workover

If yes, show depth set DLT #2 D&A Feet

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

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

If over/Re-Entry; old well info as follows:

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

Operator: N/A

Chloride content 17,000 ppm Fluid volume 1527 bbls

Well Name: _____

Dewatering method used evaporation

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite: _____

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

Operator Name _____

7-2-92 7-10-92 7/10/92
Spud Date Date Reached TD Completion Date

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 EP-4 form with all plugged wells. Submit EP-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 _____ Date 8-19-92

Subscribed and sworn to before me this 19th day of August 1992.

Notary Public Mia A. Johnston

Date Commission Expires September 13, 1994

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
RECEIVED
AUG 21 1992
DISTRIBUTION
 KCC SWD/Rep NCPA
 KGS Plug (Specify)

199 3-1002

90583

CONFIDENTIAL

OKC

Operator Name Slawson Exploration Lease Name Nollette AB Well # #1
 Sec. 7 Twp. 11S Rge. 33 East West
 County Logan

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.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

List All E.Logs Run:

CASING RECORD <input type="checkbox"/> Key <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"	28#	406'	60-40 posmix	250	2% gel 3% cc

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

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