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Form ACO-1
September 1999
Form Must Be Typed

**KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 4952
Name: Starr F. Schlobohm
Address: 47 Michawanic Road, #3D
City/State/Zip: Sanbornville, NH 03872-3787
Purchaser: _____

Operator Contact Person: John L. Driscoll

Phone: (785) 483-9580

Contractor: Name: Vonfeldt Drilling, Inc.

License: 9431

Wellsite Geologist: Dave Shumaker

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: _____

Original Comp. Date: _____ Original Total Depth: _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Enhr/SWD
☐ Plug Back ☐ Plug Back Total Depth
☐ Commingled ☐ Docket No. _____
☐ Dual Completion ☐ Docket No. _____
☐ Other (SWD or Enhr.?) ☐ Docket No. _____

<u>8/22/03</u>	<u>8/28/03</u>	<u>8/28/03</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25242-0000

County: Ellis
105° 15' W + 73° 15' S
E2 - E2 - NE Sec. 9 Twp. 13 S. R. 17 ☐ East ☒ West

3825 feet from (S) N (circle one) Line of Section

435 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Walter J. Staab Well #: 1

Field Name: Catherine

Producing Formation: _____

Elevation: Ground: 2028' Kelly Bushing: 2033'

Total Depth: 3640 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 1223' 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

(Data must be collected from the Reserve Pit)

Chloride content 63,000 ppm Fluid volume 400 bbls

Dewatering method used Allow to dry and backfill

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West

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 of 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: Starr F. Schlobohm

Title: Owner/Operator Date: Sept. 17, 2003

Subscribed and sworn to before me this 17th day of September

2003
Owner/Operator

Notary Public: JoAnne MacDonald

Date Commission Expires: 8/14/07

KCC Office Use ONLY

☐ Letter of Confidentiality Attached
If Denied, Yes ☐ Date: _____
☐ Wireline Log Received
☐ Geologist Report Received
☐ UIC Distribution

JoAnne M. MacDonald
NOTARY PUBLIC OF NEW HAMPSHIRE
My Commission Expires Aug. 14, 2007

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Operator Name: Starr F. Schlobohm Lease Name: Walter J. Staab Well #: 1
 Sec. 9 Twp. 13 S. R. 17 ☐ East ☒ West County: Ellis

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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:

Radiation Guard Log

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

Name	Top	Datum
Anhydrite	1,223'	+ 810'
Base Anhydrite	1,259'	+ 774'
Topeka	3,028'	- 995'
Heebner	3,267'	- 1,234'
Toronto	3,287'	- 1,254'
Lansing/KC	3,314'	- 1,281'
Base Lansing/KC	3,542'	- 1,509'
Arbuckle	3,579'	- 1,546'
Total depth	3,641'	- 1,608'

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
Surface	12 1/4"	8 5/8"	23#	1,223'	Common Pozmix	285 190	Gel 9 sks. Chloride 15 sks.
Dry hole D & A							

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

TUBING RECORD	Size	Set At	Packer At	Liner Run ☐ Yes ☐ No
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Date of First, Resumed Production, SWD or Enhr.	Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio Gravity

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 _____