

Sub

FEB 13 2003

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM

KCC WICHITA

COPY

Form ACD-1  
September 1999  
Form Must Be Typed

TO REPORT TUBING AND PACKER WELL HISTORY - DESCRIPTION OF WELL & LEASE  
PRODUCER CONVERTED TO INJECTION

Operator: License # 5088  
Name: John J. Darrah, Jr.  
Address: 225 N. Market #300  
City/State/Zip: Wichita, KS 67202  
Purchaser: NCRA  
Operator Contact Person: G.P. Stoeppelwerth  
Phone: ( 316 ) 263-2243  
Contractor: Name: Classic Well Service  
License: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion: Conversion to Injection-same zone, same perf.

\_\_\_\_ 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: John J. Darrah, Jr.  
Well Name: Vacek "A" #5  
Original Spud Date: 4-13-1977 Original Total Depth: 3250  
\_\_\_\_ 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. 02-CONS-079-CUIC  
2-10-2003 2/10/03  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15- Drilled 1977 15-053-20467-0001  
Ellsworth  
County: N/2 SW SW Sec. 33 Twp. 15 S. R. 10W ☐ East ☐ West  
990' FSL feet from (S) N (circle one) Line of Section  
4260 FEL feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW  
Lease Name: Vacek "A" Well #: 5  
Field Name: Stollenberg  
Producing Formation: Simpson Sand

Elevation: Ground: \_\_\_\_\_ Kelly Bushing: 1737  
Total Depth: 3250 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 296' w/ 175 sks 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 cml.

Drilling Fluid Management Plan Whelan Ex 4.7-03  
(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: \_\_\_\_\_ 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 2075, 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: [Signature]  
Agent February 10, 2003  
Title: \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and sworn to before me this tenth day of February, 2003

19 \_\_\_\_\_

Notary Public

Susan Utterback

NOTARY PUBLIC - State of Kansas  
SUSAN UTTERBACK  
My Appt. Exp. 9/7/06

KCC Office Use ONLY

N Letter of Confidentiality Attached  
If Denied: Yes ☐ Date: \_\_\_\_\_  
N Wireline Log Received  
N Geologist Report Received  
KCC Distribution

Operator Name: John J. Darrah

Vacek "A"

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Sec. 33, Twp. 15 S. R. 10W ☐ East ☒ WestLease Name: Ellsworth  
County:

Well #:

**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  
(Attach Additional Sheets)☐ Yes ☒ No

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, intermediates, 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           |                   | 8 5/8                     | 28                | 296           | 50/50 poz      | 175          |                            |
| Production        |                   | 5 1/2                     | 14                | 3239          | 50/50 poz      | 125          |                            |
|                   |                   |                           |                   |               |                |              |                            |

## 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-------|
|                | no additional                                                                             |                                                                                   |       |
|                |                                                                                           |                                                                                   |       |
|                |                                                                                           |                                                                                   |       |
|                |                                                                                           |                                                                                   |       |
|                | Tubing is plastic lined                                                                   |                                                                                   |       |

| TUBING RECORD | Size<br>2 3/8 | Set At<br>3208 | Packer At<br>3208 | Liner Run<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|---------------|---------------|----------------|-------------------|----------------------------------------------------------------------------------|
|---------------|---------------|----------------|-------------------|----------------------------------------------------------------------------------|

| Date of First, Resumed Production, SWD or Enh. r. | Producing Method<br><input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) |
|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|---------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|

| Estimated Production Per 24 Hours | Oil | Sls. | Gas | Mcf | Water | Bols. | Gas-Oil Ratio | Gravity |
|-----------------------------------|-----|------|-----|-----|-------|-------|---------------|---------|
|-----------------------------------|-----|------|-----|-----|-------|-------|---------------|---------|

Disposition of Gas

METHOD OF COMPLETION

Production Interval 3239-3250

☐ Vented ☐ Sold ☐ Used on Lease☒ Open Hole☐ Perf.☐ Dually Comp.☐ Commingled