

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

Operator: License # 6902

Name: Albert Borell

Address Box 158

City/State/Zip Wilson, KS 67490

Purchaser: _____

Operator Contact Person: Albert Borell

Phone (913) 658-2594

Contractor: Name: Vonfeldt Drilling Company

License: 9431

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD

☐ Plug Back ☐ PBTD

☐ Commingled ☐ Docket No. _____

☐ Dual Completion ☐ Docket No. _____

☐ Other (SWD or Inj?) ☐ Docket No. _____

Spud Date 10/19/92 Date Reached TD 10/23/92 Completion Date _____

API NO. 15- 167-23,036

County Russell

 - NW - NE - NE Sec. 15 Twp. 15S Rge. 11 X

4950' Feet from S/N (circle one) Line of Section

990' 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 Siefers D Well # 4

Field Name _____

Producing Formation Arbuckle

Elevation: Ground 1716' KB 1721'

Total Depth 3255' PBTD _____

Amount of Surface Pipe Set and Cemented at 515' 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 cnt.

Drilling Fluid Management Plan 12-15-92
(Data must be collected from the Reserve Pit)

Chloride content 48,509 ppm Fluid volume 350 bbls

Dewatering method used Left mud to dry.

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 Albert H. Borell

Title Owner Date Nov. 9, 1992

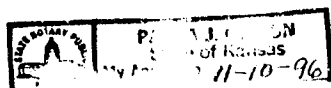
Subscribed and sworn to before me this 9th day of November, 19 92.

Notary Public Paula J. Gibson

Date Commission Expires November 10, 1996

K.C.C. OFFICE USE ONLY	
F	Letter of Confidentiality Attached
C	Wireline Log Received
C	Geologist Report Received
RECEIVED	
STATE CORPORATION COMMISSION	
Distribution	
☒ KCC	☐ SWD/RM
☐ KGS	☐ Plug
NOV 18 1992	
(Specify)	

Form ACO-1 (7-91)



Operator Name Albert W. Borell Lease Name Sieflers D 298931 Well # 4
☐ East County Russell
 Sec. 15 Twp. 15 Rge. 11 ☒ West

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 a shoe if more space is needed. Attach copy of log.

Drill Stem Tests Taken (Attach Additional Sheets.)	☒ Yes ☐ No	☐ Log	Formation (Top), Depth and Datum	☒ Sample
Samples Sent to Geological Survey	☐ Yes ☒ No	Name	Top	Datum
Cores Taken	☐ Yes ☒ No	Anhydrite	578'	
Electric Log Run (Submit Copy.)	☐ Yes ☒ No	Base Anhydrite	601'	
List All E.Logs Run:		Heebner	2768'	
		Toronto	2786'	
		Br. Lime	2862'	
		L.K.C.	2874'	
		Base K.C.	3150'	
		Conglomerate	3214'	
		Arbuckle	3246'	
		R.T.D.	3255'	

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	20#	515'	60/40 Poz	225	2%gel, 3%CC

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	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 ☐ Yes ☐ No
Date of First, Resumed Production, SWD or Inj.		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) _____

Productive Interval _____

15-15-11

SWIFT FORMATION TESTERS

1309 VAN FLEET

PHONE 793-5177

GREAT BEND, KANSAS 67530

DATE OCT 23, 92

COMPANY Albert W. Borell

ADDRESS Box 158 Wilson, Ks. 67490

LEASE SieFers WELL NO. D-4 COUNTY Russell

DEPTH 3226 TESTED FROM 3214 TO 3226 TEST NO. 1

TOOL JT. 4 1/2 XH SIZE HOLE 7 7/8 SIZE PACKER 6 3/4 MIS-RUN NO. _____

IAL HYD. 1704 # FINAL HYD. 1690 # SUCCESSFUL NO. _____

INITIAL SHUT-IN HR. 30 MIN.: TOOL OPEN HR. 60 MIN.: FINAL SHUT-IN HR. 30 MIN.

INVOICES SENT TO: _____

INITIAL FLOW PERIOD 30 MINUTES

BLOW: Fair Slowly DECREASING TO WEAK

REMARKS: _____

RECOVERY: 30' Oil Cut Mud

70' Oil Cut Watery Mud

INITIAL SHUT-IN PRESSURE 773# INITIAL FLOW PRESSURE 67-67# FINAL FLOW PRESSURE 84-84#

FINAL SHUT-IN PRESSURE 715# FIELD ORDER NO. _____ PRICE OF JOB \$550.00

TRA EQUIPMENT _____ OPERATOR TIME _____

SWIFT FORMATION TESTERS

APPROVED BY: Albert W. Borell

OUR REPRESENTATIVE [Signature]

Shall not be liable for damage of any kind to the property or personnel of the one for whom a test is made, or for any loss suffered or sustained, directly or indirectly, through the use of its equipment, or its statements or opinion concerning the results of any test. Tools lost or damaged in the hole shall be paid for at cost by the party for whom the test is made.

TICKET No. 5752 RECEIVED
NOV 18 1992