

5-15-13W
COPY

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

89165

API NO. 15- 167230460000

County Russell

E/2 NW NW Sec. 5 Twp. 15 Rge. 13 X ^E

Operator: License # 7090

660 Feet from S(circle one) Line of Section

Name: Herman Trapp

990 Feet from E(circle one) Line of Section

Address 749 Sunset

Footages Calculated from Nearest Outside Section Corner:

1660 NE, SE, NW or SW (circle one)

City/State/Zip Russell, KS 67665-3129

Lease Name Della Gross Well # 6

Purchaser: Phillips 66

Field Name Hall Gurnie

Operator Contact Person: Herman Trapp

Producing Formation Kansas City

Phone (913) 483-3058

Elevation: Ground 1744 KB 1749 ^{1750 _{res Geo pit}}

Contractor: Name: Emphasis Oil Operator

Total Depth 3215' PBDT _____

License: 8241

Amount of Surface Pipe Set and Cemented at 467' Feet

Wellsite Geologist: David Schumaker

Multiple Stage Cementing Collar Used? Yes x No _____

Designate Type of Completion

x New Well _____ Re-Entry _____ Workover _____

If yes, show depth set _____ Feet

x Oil _____ SWD _____ SIOW _____ Temp. Abd. _____

If Alternate II completion, cement circulated from ~~well~~ _____

_____ Gas _____ ENHR _____ SIGW _____

feet depth to Surface w/ 225 sx cmt.

_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc) _____

Drilling Fluid Management Plan RLT/ 6-28-93
(Data must be collected from the Reserve Pit)

If Workover/Re-Entry: old well info as follows:

Chloride content 33,000 ppm Fluid volume 12,000 bbls

Operator: _____

Dewatering method used _____

Well Name: _____

Location of fluid disposal if hauled offsite: _____

Comp. Date _____ Old Total Depth _____

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

Operator Name _____

_____ Plug Back _____ PBDT _____

_____ Commingled _____ Docket No. _____

Lease Name _____ License No. _____

_____ Dual Completion _____ Docket No. _____

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

_____ Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W _____

2-1-93 2-8-93 4-21-93
Spud Date Date Reached TD Completion Date

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 Herman Trapp

Title Operator Agent Date 5-27-93

Subscribed and sworn to before me this 27th day of May 19 93.

Notary Public Rita M. Clenney

Date Commission Expires December 17, 1995

K.C.C. OFFICE USE ONLY		
F	Letter of Confidentiality Attached	
C	Wireline Log Received	<u>X</u>
C	Geologist Report Received	
Distribution <u>IS</u>		
_____	KCC	_____ SWD/Rep
<u>X</u>	KGS	_____ Plug
_____		_____ NGPA
_____		<u>X</u> Other
(Specify)		

RITA M. CLENNEY
Notary Public - State of Kansas
My Appt. Exp. 12-17-95

Operator Name Trapp Oil Company Lease Name Della Gross Well # 6
 East County Russell
 Sec. 5 Twp. 15 Rge. 13 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 extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken Yes No
 (Attach Additional Sheets.)
 on page 4 Geological report
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No
 Electric Log Run Yes No
 (Submit Copy.)

Log Formation (Top), Depth and Datums Sample
 Name Top Datum
 L.K.C. 2902 -1152

List All E.Logs Run:
 HALLIBURTON
 Guard sidewall Neutron log
 Acoustic cement Bond log

CASING RECORD <input type="checkbox"/> New <input checked="" 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#	467'	60/40	225	2%Gel 13%CC
Oil String	7 7/8	5 1/2	14 lb.	3052	Com	135	10%Salt 5%Gel

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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2 shot per	2934-2940	Acid	2934-2940

TUBING RECORD	Set At	Packer At	Liner Run	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Size <u>18</u>	<u>3,050</u>	<u>None</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Date of First 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)						
Estimated Production Per 24 Hours	Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity		
<u>1</u>			<u>Trace</u>		<u>38.5</u>		

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 _____