

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

Operator: License # 6600

Name: Don Karst Well Service, Inc.

Address P. O. Box 1316

City/State/Zip Hays, KS 67601

Purchaser: none

Operator Contact Person: Don Karst

Phone (913) -628-1125

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Ron Nelson

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover

☐ Oil ☐ SWD ☐ SOW ☐ Temp. Abd.

☐ Gas ☐ ENHR ☐ SIGW

☒ Dry ☐ Other (Core, VSW, 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 ☐ PBDT

☐ Casing/Log Docket No.

☐ Dual Completion Docket No.

☐ Other (SWD or Inj?) Docket No.

7/16/92

7/23/92

7/23/92

Spud Date

Date Reached TD

Completion Date

API NO. 15- 063-21,438

County Gove

125' W of SW-NE Sec. 8 Twp. 15S Rge. 28 X E

3400 Feet from SYM (circle one) Line of Section

2070 Feet from EYM (circle one) Line of Section

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

Lease Name Coberly Well # 1

Field Name Wildcat

Producing Formation none

Elevation: Ground 2530' KB 2535'

Total Depth 4266' PBDT n/a

Amount of Surface Pipe Set and Cemented at 272 Feet

Multiple Stage Cementing Collar Used? Yes XX No

If yes, show depth set Feet

If Alternate II completion, cement circulated from

feet depth to w/ sx cat.

Drilling Fluid Management Plan ALT 2 DR 10-22-92
(Data must be collected from the Reserve Pit)

Chloride content 6000 ppm Fluid volume 160 bbls

Dewatering method used vacuum truck

Location of fluid disposal if hauled offsite:

Operator Name Don Karst Well Service, Inc.

Lease Name Sitz A#2 SWD License No. 6600

SW Quarter Sec. 26 Twp. 12 S Rng. 16 XX E

County Ellis Docket No. D-25,185

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 Donald D. Karst

Title President

Date 9-10-92

Subscribed and sworn to before me this 10TH day of SEPTEMBER, 1992.

Notary Public

Colleen Payton

Colleen Payton
NOTARY PUBLIC
State of Kansas

Date Commission Expires

May 2, 1995

RECEIVED
STATE CORPORATION COMMISSION
K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received SEP 14 1992
C Geologist Report Received
Distribution
XCC
XGS
SWD/Rep
Plug
Other (Specify)
Form ACO-1 (7-91)

Operator Name Don Karst well service, Inc.Lease Name CoberlyWell # 1☐ EastCounty GoveSec. 8 Twp. 15S Rge. 28☒ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests including 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 type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Top Anhydrite	1978	+561
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Base Anhydrite	2010	+529
List All E.Logs Run:		Heebner	3687	-1148
R.A. Guard Log		LKC	3724	-1185
		Base KC	4050	-1511
		Marmaton	4089	-1550
		Pawnee	4169	-1630

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"	28#	273'	60/40	150	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		NONE		
<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
	NONE		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
	none				
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)		
	none				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Grav
	NONE				

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____