

Incl
PI

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # ..5144.....
NameMULL DRILLING COMPANY...
AddressP.O. Box 2758.....
City/State/Zip ..Wichita, KS..67201.....

Purchaser.....NA.....

Operator Contact Person ..Patricia Ungleich...
Phone(316) 264-6366.....

Contractor: License # ..5651.....
NameMallard Drlg. Co...Wichita.....

Wellsite Geologist.....Paul Gunzelman.....
Phone.....264-6366.....

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc)

If **OWNO**: old well info as follows:
Operator
Well Name
Comp. DateOld Total Depth.....

WELL HISTORY

Drilling Method:
 Mud Rotary Air Rotary Cable

.3/23/85.... .4/2/85..... P&A 4/2/85....
Spud Date Date Reached TD Completion Date

.5285..... ...NA.....
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at.....feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from .2660.....feet depth to surface w/230.5X cmt

API NO. 15-.....109-20,371.....

County.....Logan.....

NW.. NW.. SE. Sec.28 Twp.15S Rge.37W. West

2310..... Ft North from Southeast Corner of Section
2310..... Ft West from Southeast Corner of Section
(Note: Locate well in section plat below)

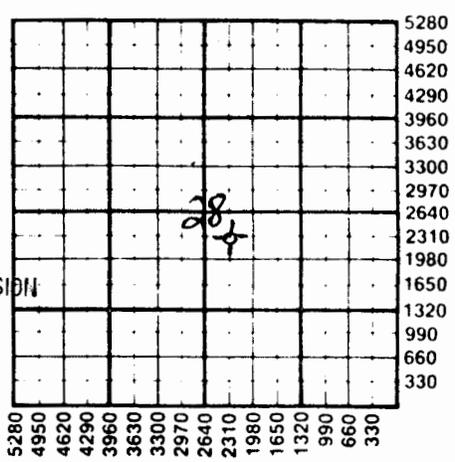
Lease Name.....RICHARDSON.....Well #.#1.....

Field Name.....Wildcat.....

Producing Formation.....NA.....

Elevation Pound...3397.....KB.....3405.....

Section Plat



MAY 13 1985
State Geological Survey
WICHITA BRANCH

RECEIVED

STATE CORPORATION COMMISSION
MAY 06 1985
CONSERVATION DIVISION
Wichita, Kansas

WATER SUPPLY INFORMATION

Disposition of Produced Water: Disposal
Docket # Repressuring

Questions on this portion of the ACO-1 call:
Water Resources Board (913) 296-3717

Source of Water:
Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner
(Well) Ft West from Southeast Corner of
Sec Twp Rge East West

Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge East West

Other (explain).....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

147407

Operator Name MULL DRILLING COMPANY, INC. Lease Name RICHARDSON Well # #1

Sec. 28 Twp. 15S Rge. 37W East West County Logan

WELL LOG

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
 Samples Sent to Geological Survey Yes No
 Cores Taken Yes No

Formation Description
 Log Sample

Name	Top	Bottom
T/Anhydrite	2651	+ 754
Topeka	3844	- 439
Heebner	4078	- 673
Toronto	4096	- 691
Lansing	4132	- 727
BKc	4537	-1133
Marmaton	4558	-1153
Ft Scott	4706	-1301
Cherokee	4734	-1329
Morrow	4878	-1473
Miss St. Gen	5014	-1609
St. Louis	5171	-1766
Spergen	5232	-1827
LTD	5274	-1869
RTD	5285	-1880

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 1/2"	8-5/8"	24#	472.26'	.60-40 pbz, 3%cc		2%gel

PERFORATION RECORD	Acid, Fracture, Shot, Cement Squeeze Record
Shots Per Foot	Specify Footage of Each Interval Perforated (Amount and Kind of Material Used)
	Depth

TUBING RECORD	Size	Set At	Packer at	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First Production _____ Producing Method Flowing Pumping Gas Lift Other (explain) _____

STATE OF KANSAS
STATE CORPORATION COMMISSION
CONSERVATION DIVISION
200 Colorado Derby Building
Wichita, Kansas 67202

FORM CP-1
Rev. 6/4/84

28 - 15 - 37W^{PL}

WELL PLUGGING APPLICATION FORM
(File One Copy)

API NUMBER 15-109-20,371 (of this well)
(This must be listed; if no API# was issued, please note drilling completion date.)

LEASE OPERATOR Mull Drilling Co., Inc. OPERATORS LICENSE NO. 5144

ADDRESS P.O. Box 2758 Wichita, Ks. 67201 PHONE # (316) 264-6366

LEASE (FARM) Richardson WELL NO. 1 WELL LOCATION NW NW SE COUNTY Logan

SEC. 8 TWP. 15S RGE. 37W ~~EXPOS~~ (W) TOTAL DEPTH 5285 PLUG BACK TD _____

Check One:

OIL WELL _____ GAS WELL _____ D & A X SWD or INJ WELL _____ DOCKET NO. _____

SURFACE CASING SIZE 8 5/8" SET AT 472' CEMENTED WITH 280 SACKS

CASING SIZE _____ SET AT _____ CEMENTED WITH _____ SACKS

PERFORATED AT _____

CONDITION OF WELL: GOOD _____ POOR _____ CASING LEAK _____ JUNK IN HOLE _____

OPERATOR'S SUGGESTED METHOD OF PLUGGING THIS WELL 230 sx in conventional manner

(If additional space is needed use back of form)

IS LOG ATTACHED TO THIS APPLICATION AS REQUIRED? yes IS ACO-1 FILED? _____
(If not, explain)

DATE AND HOUR PLUGGING IS DESIRED TO BEGIN April 2, 1985

PLUGGING OF THIS WELL WILL BE DONE IN ACCORDANCE WITH K.S.A. 55-101 et seq AND THE RULES AND REGULATIONS OF THE STATE CORPORATION COMMISSION.

NAME OF COMPANY REPRESENTATIVE AUTHORIZED TO BE IN CHARGE OF PLUGGING OPERATIONS:

Jay D Schneider PHONE # () _____

ADDRESS Otis, Ks.

PLUGGING CONTRACTOR Haliburton LICENSE NO. _____

ADDRESS _____ PHONE # () _____

PAYMENT WILL BE GUARANTEED BY OPERATOR OR AGENT SIGNED: _____

(Operator or Agent)
Mull Drilling Company, Inc.
Michael R. Kidwell, President
May 2, 1985

DATE: _____