

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

3540

API NO. 15- 053-01,018

County Ellsworth

SW - NE - NE - 4 Sec. 16 Twp. 10 Rge. West

Operator: License # 6901

4290 Feet from S/M (circle one) Line of Section

Name: D. S. & W. Well Servicing, Inc.

990 Feet from E/W (circle one) Line of Section

Address P. O. Box 231

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

City/State/Zip Claflin Kansas 67525

Lease Name Heitschmidt Well # 5

Purchaser: Koch Oil Company

Field Name Progress

Operator Contact Person: Joseph F. Strube

Producing Formation Arbuckle

Phone (316) 587-3361

Elevation: Ground 1803 KB 5' above ground
Level

Total Depth 3750 1880 PBTB

Contractor: Name: _____

Amount of Surface Pipe Set and Cemented at 355 Feet

License: Company tools

Multiple Stage Cementing Collar Used? Yes No

Wellsite Geologist: _____

If yes, show depth set _____ Feet

Designate Type of Completion

If Alternate II completion, cement circulated from _____

New Well Re-Entry Workover

Oil SWD SIOW Temp. Abd.

feet depth to _____ w/ _____ sx cat.

Gas ENHR SIGW

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

Drilling Fluid Management Plan

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

(Data must be collected from the Reserve Pit)

Operator: Henderson Oil Company

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: Burecky #4

Dewatering method used _____

Comp. Date 09-16-55 Old Total Depth 3750

Location of fluid disposal if hauled offsite: _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back _____ PBTB

Commingled _____ Docket No. _____

Dual Completion _____ Docket No. _____

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

Operator Name _____

Lease Name _____ License No. _____

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

County _____ Docket No. _____

12-12-90 1880' 01-04-91

Spud Date Date Reached TD Completion Date

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 Joseph F. Strube

Title President Date 12-4-91

Subscribed and sworn to before me this 4th day of December 19 91.

Notary Public Bonnie Council

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Geologist Report Received

EDWARDS COUNTY COMMISSION

KCC _____ SWD/Rep _____ NGPA _____

Plug _____ Other _____

JAN 9 1992 (Specify)

Date Commission Expires April 8, 1993

APPT. EXPIRES 4-8-93

DEG 65 991

CONSERVATION DIVISION
WICHITA, KS

Operator Name D. S. & W. WELL SERVICING, INC Lease Name Heitschmidt Well # 5

Sec. 4 Twp. 16 Rge. 10 East West County Ellsworth

COPY

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	None OWWO	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				
no log available				

CASING RECORD <input type="checkbox"/> New <input 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 Pipe		8 5/8"		355	Previously set		

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		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	<input type="checkbox"/> Yes <input type="checkbox"/> No
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)				
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)

Production Interval _____