

7230

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

API NO. 15- 071-20,550

OCT 29

County Greeley

SW - SW - NW Sec. 27 Twp. 6S Rge. 12E **CONFIDENTIAL**

Operator: License # 05152

2310 Feet from S(N) (circle one) Line of Section

Name: Lee Banks (d/b/a Banks Oil Co.)

330 Feet from E(N) (circle one) Line of Section

Address 200 W. Douglas, Suite 550

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

City/State/Zip Wichita, KS 67202

Lease Name Young Well # 1-27

Purchaser: n/a

Field Name unnamed

Operator Contact Person: Lee Banks

Producing Formation _____

Phone (316) 267-0783

Elevation: Ground 3835' KB 3844'

Contractor: Name: Murfin Drilling Co., Inc.

Total Depth 5250' PBDT 5250'

License: 30606

Amount of Surface Pipe Set and Cemented at 379' Feet

Wellsite Geologist: Scott Banks

Multiple Stage Cementing Collar Used? n/a Yes _____ No _____

Designate Type of Completion

If yes, show depth set _____ Feet

New Well _____ Re-Entry _____ Workover _____

If Alternate II completion, cement circulated from _____

_____ Oil _____ SWD _____ S10W _____ Temp. Abd.

feet depth to _____ D&A - n/a w/ _____ sx cnt.

_____ Gas _____ ENHR _____ S1GW _____

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

Drilling Fluid Management Plan API II D&A
(Data must be collected from the Reserve Pit)

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

Operator: _____

Chloride content 5,000 ppm Fluid volume 300 bbls

Well Name: _____

Dewatering method used natural evaporation

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite:
none

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

_____ Plug Back _____ PBDT _____

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

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

Operator Name _____

Lease Name _____ License No. _____

10/11/91

10/18/91

10/19/91

Spud Date

Date Reached TD

Completion Date

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 _____

owner

Date 10-29-91

Subscribed and sworn to before me this 29th day of October 1991.

Notary Public _____

Aug. 28, 1992

OCT 30 1991

DARLENE J. MAY
Notary Public - State of Kansas
My Appt. Expires _____

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

SIDE TWO

Operator Name Lee Banks (d/b/a Banks Oil Co.) Lease Name Young Well # 1-27
 Sec. 27 Twp. 16S Rge. 42 East County Greeley 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Topeka	3858' (- 18)	
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	4084' (- 240)	
at All E.Logs Run: BHC-Sonic Dual Ind. Comp. SSD, Comp. Neutron		Lansing	4188' (- 344)	
		Marmaton	4512' (- 668)	
		Cherokee	4712' (- 877)	
		AToka	4834' (- 990)	
		Morrow Shale	4980' (-1136)	
		Morrow Lime	5088' (-1244)	
		Mississippi	5136' (-1292)	
		LTD	5250'	

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"	23#	379'	60/40	225	3%CC 2%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

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 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) _____

Production Interval _____