

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5144
Name: Mull Drilling Company, Inc.
Address: P.O. Box 2758
City/State/Zip: Wichita, KS 67201-2758
Purchaser: EOTT Energy
Operator Contact Person: Mark A. Shreve
Phone: (316) 264-6366
Contractor: Name: _____
License: _____
Wellsite Geologist: _____
Designate Type of Completion:
____ New Well ____ Re-Entry X Workover
X Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)
If Workover/Re-entry: Old Well Info as follows:
Operator: Mull Drilling Company, Inc.
Well Name: Graeff #2
Original Comp. Date: 3-14-00 Original Total Depth: 4590
____ Deepening X Re-perf. ____ Conv. to Enhr./SWD
____ Plug Back ____ Plug Back Total Depth
____ Commingled ____ Docket No. ____
____ Dual Completion ____ Docket No. ____
____ Other (SWD or Enhr.?) ____ Docket No. ____
11-7-02 11-7-02 11-12-02
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 101-21777
County: Lane
____ W2-NE-NW Sec. 9 Twp. 17 S. R. 28 ☐ East ☒ West
____ 660 feet from S N (circle one) Line of Section
____ 1650 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Graeff Well #: 2
Field Name: Shields
Producing Formation: Lansing KC J
Elevation: Ground: 2766 Kelly Bushing: 2774
Total Depth: 4590 Plug Back Total Depth: 4550
Amount of Surface Pipe Set and Cemented at 221 Feet
Multiple Stage Cementing Collar Used? ☒ Yes ☐ No
If yes, show depth set 2200 Feet
If Alternate II completion, cement circulated from 2200
feet depth to surface w/ 235 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____
Lease Name: _____ License No.: _____
Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West
County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: [Signature]
Title: Sr. Eng. & Prod. Tech. Date: 12-19-02
Subscribed and sworn to before me this 19th day of December, 2002
Notary Public: [Signature]
Date Commission Expires: 8-05
My Appt. Exp. _____

KCC Office Use ONLY

____ Letter of Confidentiality Attached
If Denied, Yes ☐ Date: _____
____ Wireline Log Received
____ Geologist Report Received
____ UIC Distribution

Operator Name: Mull Drilling Company, Inc. Lease Name: Graeff Well #: 2
 Sec. 9 Twp. 17 S. R. 28 ☐ East ☒ West County: Lane

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☐ No
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run ☐ Yes ☐ No

(Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

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	# Sacjs Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
4	4290-4294 & 4231-4235 CIBP @ 4226		
4	4208-4214	500 gals 15% MCA	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8	4210'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumerd Production, SWD or Enhr.	Producing Method			
11-12-02	<input type="checkbox"/> Flowing <input checked="" 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
	14	0	15	0 36°

Disposition of Gas

METHOD OF COMPLETION

Production Interval

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

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