

TYPE

AFFIDAVIT OF COMPLETION FORM

19-17-90^{PL}
ACO-1 WELL HISTORY

Compt.

SIDE ONE

Two (2) copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within thirty (30) days after the completion of a well, regardless of how the well was completed.

F Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on Side One will be of public record and Side Two will then be held confidential.

Applications must be made on dual completion, commingling, salt water disposal, injection and temporarily abandoned wells.

C Attach one copy only wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). (Rules 82-2-105 & 82-2-125) KCC# (316) 263-3238.

LICENSE # 6519 EXPIRATION DATE 6-30-83

OPERATOR CB Cannan API NO. OWWO

ADDRESS Box 453 COUNTY Ellsworth

Pratt Kans FIELD

** CONTACT PERSON same PROD. FORMATION Arbuckle

PHONE 316 672 3870

PURCHASER Univ. Cooperative Refining Assn LEASE NE 1/4

ADDRESS Box 1167 WELL NO. 1 OWWO

McPherson Kans WELL LOCATION SE SE NE

DRILLING DS&W Well Service 440 Ft. from S Line and

CONTRACTOR Clayton 440 Ft. from E Line of

ADDRESS Kans the NE (Qtr.) SEC 19 TWP 17 RGE 9 W

PLUGGING None WELL PLAT (Office Use Only)

CONTRACTOR None KCC

ADDRESS None KGS

TOTAL DEPTH 32 38 PBTD

SPUD DATE 5-19-80 DATE COMPLETED 7-15-80

Organized 5-19-80 ELEV: GR 1780 DF 8-21-80 KB

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS. SECU

DOCKET NO. OF DISPOSAL OR REPRESSURING WELL BEING USED TO DISPOSE OF WATER FROM THIS LEASE CD 88255

Amount of surface pipe set and cemented 205 DV Tool Used? n/a

THIS AFFIDAVIT APPLIES TO: (Circle ONE) - Oil, Gas, Shut-in Gas, Dry, Disposal, Injection, Temporarily Abandoned, OWWO, Other None.

ALL REQUIREMENTS OF THE STATUTES, RULES AND REGULATIONS PROMULGATED TO REGULATE THE OIL AND GAS INDUSTRY HAVE BEEN FULLY COMPLIED WITH.

OCT 19 1982
RECEIVED
KANSAS CORPORATION COMMISSION

CONSERVATION DIVISION
WICHITA, KANSAS

AFFIDAVIT

C. B. Cannan, being of lawful age, hereby certifies that:

I am the Affiant, and I am familiar with the contents of the foregoing Affidavit. The statements and allegations contained therein are true and correct.

UPPER TWO
OPERATOR CB Canada LEASE Mehl SEC. 19 TWP. 17 RGE. 9

ACO-1 WELL HISTORY

WELL NO. 1

FILL IN WELL INFORMATION AS REQUIRED:

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
<input checked="" type="checkbox"/> Check if no Drill Stem Tests Run.				

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
<u>NONE</u>	

Date of first production	Producing method (flowing, pumping, gas lift, etc.)		Gravity
<u>7-16-80</u>	<u>Pumping</u>		<u>45</u>
Estimated Production -I.P.	<u>5</u> bbls.	<u>None</u> MCF	Water % <u>24.5</u> bbls.
Disposition of gas (vented, used on lease or sold)			Perforations <u>None</u>

IP. 75 BBLs 1 DAY 60 1 DAY 40-1 WEEK 20 DECREASED TO 5 BBLs

If additional space is needed use Page 2, Side 2

Report of all strings set — surface, intermediate, production, etc. CASING RECORD (New) or (Used)

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives

LINER RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD

Size	Setting depth	Packer set at		
<u>2 1/2</u>	<u>3105.49</u>	<u>3074</u>	<u>None</u>	

KANSAS

State Geological Survey
WICHITA, BRANCHWELL COMPLETION REPORT AND
DRILLER'S LOG

API No. 15 — _____ County _____ Number _____

Operator

CB (KANSAS)

Address

Box 453 Pratt, Kans 67124

Well No.

1

Lease Name

Mehl Oil Well

Footage Location

440 feet from (N) (S) line

440 feet from (E) (W) line

Principal Contractor

DSW WELL SERV

Geologist

Spud Date

5-19-80

Date Completed

7-15-80

Total Depth

3238

P.B.T.D.

V

Directional Deviation

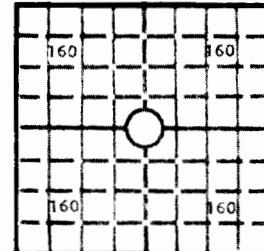
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Oil and/or Gas Purchaser

NCRA

640 Acres

N



Locate well correctly

Elev.: Gr.

DF _____ KB _____

CASING RECORD

Report of all strings set—surface, intermediate, production, etc.

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives

5 1/2 Casing Already in Hole

LINER RECORD

PERFORATION RECORD

Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval
			NONE		

TUBING RECORD

Size	Setting depth	Packer set at		
2 3/8"	3002	2949		

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used			Depth interval treated
None			

INITIAL PRODUCTION

Date of first production		Producing method (flowing, pumping, gas lift, etc.)				
July 1980		Pumping				
RATE OF PRODUCTION PER 24 HOURS	Oil 11 bbis.	Gas — bbis.	Water MCF 245 bbis.	Gas-oil ratio CFPB		
Disposition of gas (vented, used on lease or sold)		Producing interval (s) 3226 - 3238				

INSTRUCTIONS: As provided in KCC Rule 82-2-125, within 90 days after completion of a well, one completed copy of this Drillers Log shall be transmitted to the State Geological Survey of Kansas, 4150 Monroe Street, Wichita, Kansas 67209. Copies of this form are available from the Conservation Division, State Corporation Commission, 245 No. Water, Wichita, Kansas 67202. Phone AC 316-522-2206. If confidential custody is desired, please note Rule 82-2-125. Drillers Logs will be on open file in the Oil and Gas Division, State Geological Survey of Kansas, Lawrence, Kansas 66044.

Operator

CB Parman

DESIGNATE TYPE OF COMP.: OIL, GAS,
DRY HOLE, SWDW, ETC.:

Well No.

1

Lease Name

Mehl

Oil

S 19 T 17 R 9 ~~E~~
W

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN,
OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

Date Received

Signature

Parman

Title

9-16-80

Date