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KCC WICHITA
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Oil SWD SLOW Temp. Abd.
Gas ENHR SIGW
Dry X Other (Core, WSW, Expl., Cathodic, etc)

ol., Cathodic, etc)

Comp. Date	Old Total Depth
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_____ Deepening _____	_____ Re-perf. _____	_____ Conv. to Inj/SWD _____
_____ Plug Back _____		_____ PBTD _____
_____ Commingled _____	_____ Docket No. _____	
_____ Dual Completion _____	_____ Docket No. _____	
_____ Other (SWD or Inj?) _____	_____ Docket No. _____	

<u>05/16/01</u>	<u>05/22/01</u>	<u>07/22/01</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

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 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.

Date Commission Expires 9/7/2003

K.C.C. OFFICE USE ONLY

F	<u>✓</u>	Letter of Confidentiality Attached
C	<u>✓</u>	Wireline Log Received
C	<u>NO</u>	Geologist Report Received

Distribution

<u> </u> KCC	<u> </u> SWD/Rep	<u> </u> NGPA
<u> </u> KGS	<u> </u> Plug	<u> </u> Other
		(Specify)

Operator Name PETROSANTANDER (USA) INCLease Name McFERRENWell # McFERREN #3
COPY☐ EastCounty FINNEY☒ WestSec. 33 Twp. 23S Rge. 32

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
(Attach Additional Sheets.)Samples Sent to Geological Survey ☐ Yes ☒ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☒ Yes ☐ No
(Submit Copy.) (See attached letter)

List ALL E Logs run

DUAL INDUCTION
MICROLOG
COMP NEUT DENS
SONIC☒ Log Formation (Top), Depth and Datums ☐ Sample

Name	Top	Datum
HEEBNER	3836'	-992'
LANSING	3926'	-1082'
MARMATON	4405'	-1561'
PAWNEE	4488'	-1644'
CHEROKEE	4529'	-1685'
MORROW	4698'	-1854'
ST GENEVIEVE	4734'	-1890'
ST LOUIS	4804'	-1960'
RTD	4850'	-2006'

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CASING RECORD

☒ New ☐ Used

Report all strings set-conductor, surface, intermediate, production, etc.

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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#	581'	LITE/Class C	200/100	2% cc/2% cc
PRODUCTION	7-7/8"	5-1/2"	15.5#	4081'	50/50 Poz	125	2% cc

ADDITIONAL CEMENTING/SQUEEZE RECORD NONE

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
2	3604-3612 / 3696-3707 / 3750-3776	Acid:- 10,000 gal HCl	
2	3796-3806 / 3808-3822	Flush - 3360 gal 2% KCl water	
		Frac - 22,890 gal Ultravis 25	
		48,500# 12/20 Brady sand	
TUBING RECORD: Size 2-7/8" Set At 3614' Packer At		Liner Run Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Date of First, Resumed Production, SWD or Inj 07/24/02		Producing Method. <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.

Disposition of Gas.

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled☒ Other (Specify) Water Supply Well