

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1998
Fbrm Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 31980
Name: Lotus Operating Co. LLC
Address: 100 S. Main, Suite 520
City/State/Zip: Wichita, KS 67202
Purchaser: Phillips Exploration, LC
Operator Contact Person: Tim Hellman
Phone: (316) 262-1077
Contractor: Name: Pickrell Drlg
License: 5123
Wellsite Geologist: Joe Baker

Designate Type of Completion:

☐ New Well ☐ Re-Entry ☐ Workover
☐ Oil ☐ SWD ☐ SLOW ☐ Temp. Adv.
☒ Gas ☐ ENHR ☐ SIGW
☐ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

☐ Deepening ☐ 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. _____

7-5-01 7-11-01 8-2-01

Spud Date or
Recompletion Date Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 155 - 21454

County: Reno

approx. S/2 S/2 NW Sec. 16 Twp. 23 S. R. 7 ☐ East ☒ West

1360' feet from S (N) (circle one) Line of Section

810' feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE (NW) SW

Lease Name: Beachner Well #: 1

Field Name: Wildcat

Producing Formation: Mississippi

Elevation: Ground: 1598 Kelly Bushing: 1603

Total Depth: 3779' Plug Back Total Depth: 3740'

Amount of Surface Pipe Set and Cemented at 272' Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

Drilling Fluid Management Plan ALT 1 9H 02/14/02

(Data must be collected from the Reserve Pit)

Chloride content none ppm Fluid volume none bbls

Dewatering method used none

Due to early mud up, trace of water

Location of fluid disposal if hauled offsite: displaced

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: Virginia Lee Smith

Title: Managing member Date: 8-21-01

Subscribed and sworn to before me this 21st day of August

2001.

Notary Public: Virginia Lee Smith

Date Commission Expires: August 25, 2004

VIRGINIA LEE SMITH
NOTARY PUBLIC

KCC Office Use ONLY

☒ Letter of Confidentiality Attached

☐ If Denied, Yes ☐ Date: _____

☒ Wireline Log Received

☐ Geologist Report Received

☐ UIC Distribution

Operator Name: Lotus Operating Co, LLC Lease Name: Beachner Well #: #1
 Sec. 16 Twp. 23 S. R. 7 ☐ East ☒ West County: Reno

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: Dual Induction, CDL/CNL
Sonic

AUG 21 2001

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

| Name | Top | Datum |
|---------|------|-------|
| Heebner | 2833 | -1230 |
| Lansing | 3050 | -1447 |
| BKC | 3430 | -1827 |
| Miss | 3600 | -1997 |
| RTD | 3779 | -2176 |
| LTD | 3780 | -2177 |

CONFIDENTIAL

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 |
|-------------------|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| Surface | 12 3/4" | 8 5/8" | 20# | 272' | 60/40 poz | 235 | 2% G/3% CC |
| Production | 7 7/8" | 5 1/2" | 14# | 3765' | 60/40 poz | 160 | Latex in last 50 s. |

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 | | | | |

FROM CONFIDENTIAL

| 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 | 3600-3603' | Natural | |
| | | | |
| | | | |
| | | | |
| | | | |

| TUBING RECORD | Size | Set At | Packer At | Liner Run |
|---|---|---------|-------------|---|
| | 2 3/8" | 3708' | none | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. | Producing Method | | | |
| 8/3/01 | <input checked="" 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 |
| | 0 | 250 | none | |

Disposition of Gas **METHOD OF COMPLETION**

Production Interval **3600'-3603'**

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

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