

Plugged 1-19
COPY

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

Operator: License # 5393

Name: A. L. Abercrombie, Inc.

Address 150 N. Main, Ste 801

City/State/Zip Wichita, KS 67202

Purchaser: _____

Operator Contact Person: Mark Galyon

Phone (316) 262-1841

Contractor: Name: Abercrombie RTD, Inc.

License: 30684

Wellsite Geologist: Steve Frankamp

Designate Type of Completion
 New Well Re-Entry Workover

Oil SWD SIGW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Explor., Cathodic, etc.)

If Workover/Re-Entry: old well info as follows: FEB - 2 1994

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

01-10-94 01-20-94

Spud Date 01-10-94 Date Reached TD 01-20-94 Completion Date _____

API NO. 15- 057-20,522

County Ford

S/2- N/2 SE Sec. 25 Twp. 25S Rng. 21 X ^E

1650' Feet from S/W (circle one) Line of Section

1320' Feet from E/W (circle one) Line of Section

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

Lease Name Ditges Well # #2

Field Name Ford

Producing Formation _____

Elevation: Ground 2270' KB 2275'

Total Depth 4820' PBTD _____

Amount of Surface Pipe Set and Cemented at 705.64' 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/ _____ sz cmc.

Drilling Fluid Management Plan DFA 4-20-94
(Data must be collected from the Reserve Pit) GP

Chloride content 48,000 ppa Fluid volume 1400 bbls

Dewatering method used evaporation

Location of fluid disposal if hauled offsite: _____

Operator Name N/A

Lessee Name _____ License No. _____

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 Mark Galyon

Title Vice President (RTD) Date 1-28-94

Subscribed and sworn to before me this 28th day of January, 19 94.

Notary Public Angela Woodard

Date Commission Expires 3-20-97

ANGELA WOODARD
Notary Public • State of Kansas
My ADUT Expires _____

OFFICE USE ONLY

Letter of Confidentiality Attached

Wireline Log Received

Geologist Report Received

Distribution

KCC SWD/Rep NGPA

KGS Plug Other (Specify) _____

Operator Name A. L. Abercrombie, Inc. Lease Name Ditges Well # 2
 Sec. 25 Twp. 25S Rge. 21 East West
 County Ford

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 sheets if more space is needed. Attach copy of log.

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:

See Attached Sheet

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

See Attached Sheet

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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"	28#	704.64'	60-40 portmix	350	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 Yes 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

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Production Interval