FORM MUST BE TYPED

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

API NO. 15- 057-20,486 00 01

Operator: License # 5015

Name: Hellar Drilling Co., Inc.

Address 125 No. Market

Suite 1422

City/State/Zip Wichita, Kansas 67202

Purchaser:

Operator Contact Person: D. L. Hellar

Phone (316) 267-2845

Contractor: Name:

License:

Wellsite Geologist:

Designate Type of Completion

____ New Well ____ Re-Entry ____ Workover

____ Oil ~~X SWD~~ ____ SIOW ____ Temp. Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: Hellar Drilling Co., Inc.

Well Name: Israel #3

6480 Comp. Date 7/28/92 Old Total Depth 4846

____ Deepening ____ Re-perf. X Conv. to Inj/SWD
____ Plug Back 4819 PBTD
____ Commingled Docket No.
____ Dual Completion Docket No.
X Other (SWD or Inj?) Docket No. D-26,585

4/30/90 Spud Date | 5/9/90 Date Reached TD | 6/4/90 Completion Date

NW - NW - ~~NW~~ SW - Sec. 35 Twp. 25S Rge. 21 E X W

2310 Feet from S/N (circle one) Line of Section

4950 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 Israel Well # 3

Field Name Coon Creek North

Producing Formation Mississippian (Inj Zone)

Elevation: Ground 2303 KB 2313

Total Depth 4846 PBTD 4220

Amount of Surface Pipe Set and Cemented at ____ 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 DLT 1 RD 1-15-92
(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 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 D. L. Hellar

Title President Date 8/19/92

Subscribed and sworn to before me this 19th day of August, 19 92.

Notary Public Judy C. Ridder
Judy C. Ridder

Date Commission Expires June 16, 1996

JUDY C. RIDDER
STATE NOTARY PUBLIC
SEDGWICK COUNTY, KANSAS
MY APPT. EXP. 6/16/96

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Geologist Report Received

Distribution
____ KCC ____ SWD/Rep ____ NGPA
✓ KGS ____ Plug ____ Other (Specify)

RECEIVED
STATE CORPORATION COMMISSION
AUG 21 1992
CONSERVATION DIVISION
Wichita, Kansas

Form ACO-1 (7-91)

SIDE TWO

Operator Name Hellar Drilling Co., Inc. Lease Name Israel Well # 3

☐ East
Sec. 35 Twp. 25 Rge. 21 ☒ 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 sheet if more space is needed. Attach copy of log.

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

Samples Sent to Geological Survey ☐ Yes ☐ No

Cores Taken ☐ Yes ☐ No

Electric Log Run (Submit Copy.) ☐ Yes ☐ No

List All E.Logs Run:

☐ Log ☐ Sample

Formation (Top), Depth and Datums

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	# Sacks Used	Type and Percent Additives
				395			

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top	Depth Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
X Perforate			Common	75	
___ 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

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	Gravity

Disposition of Gas: ☐ Vented ☐ Sold ☐ Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled ☐ Other (Specify)

Production Interval 4760-83 (Inj Zone)