

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

Operator: License # 6236 **CONFIDENTIAL**Name: MTM Petroleum, Inc.Address PO Box 82City/State/Zip Spivey KS 67142Purchaser: Oil-Cooperative Refining Gas-Ks. Gas SupplyOperator Contact Person: Marvin A. MillerPhone 316, 532-3794Contractor: Name: Shawnee Well ServiceLicense: 30346

Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion

\_\_\_\_ New Well \_\_\_\_ Re-Entry ☒ Workover

☒ Oil \_\_\_\_ SWD \_\_\_\_ SLOW \_\_\_\_ Temp. Abd.  
☒ Gas \_\_\_\_ ENHR \_\_\_\_ SIGW \_\_\_\_  
 \_\_\_\_ Dry \_\_\_\_ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: MTM Petroleum, Inc.Well Name: Mayer #1Comp. Date 8-7-99 Old Total Depth 4541'

\_\_\_\_ Deepening ☒ Re-perf. \_\_\_\_ Conv. to Inj/SWD  
 \_\_\_\_ Plug Back \_\_\_\_ PBDT  
 \_\_\_\_ Commingled \_\_\_\_ Docket No. \_\_\_\_  
 \_\_\_\_ Dual Completion \_\_\_\_ Docket No. \_\_\_\_  
 \_\_\_\_ Other (SWD or Inj?) \_\_\_\_ Docket No. \_\_\_\_

1-30-99 12-3-99  
 Spud Date Date Reached TD Completion Date

API NO. 15- 095-21754-000County KingmanC W2 NW SE Sec. 20 Twp. 29S Rge. 7W1980 Feet from S/N (circle one) Line of Section2310 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:  
NE SE, NW or SW (circle one)Lease Name Mayer Well # 1Field Name SettleProducing Formation MississippianElevation: Ground 1562' KB 1567'Total Depth 4541' PBTD \_\_\_\_\_Amount of Surface Pipe Set and Cemented at 256KB FeetMultiple 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 Re-work, 6-15-00 U.C.  
(Data must be collected from the Reserve Pit)Chloride content \_\_\_\_\_ ppm Fluid volume 80 bblsDewatering method used Hauled offsite

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name Messenger PetroleumLease Name Nicholas SWD License No. 4706\_\_\_\_ Quarter Sec. 20 Twp. 30 S Rng. 8W E/WCounty Kingman Docket No. D-27,434

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.

Signature Marvin A. Miller  
 Title Marvin A. Miller, President Date 2-22-2000

Subscribed and sworn to before me this 22nd day of February,  
 192000

Notary Public Kathy HillDate Commission Expires 01-04-2003

K.C.C. OFFICE USE ONLY  
☒ Letter of Confidentiality Attached  
☐ Wireline Log Received  
☐ Geologist Report Received

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

Release

MAY 1 2004

From  
Confidential

Form ACO-1 (7-91)

Operator Name MTM Petroleum, Inc. SIDE TWO  
 Lease Name Mayer Well # 1  
 Sec. 20 Twp. 29S Rge. 7W ☐ East  
 County Kingman ☐ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Report all drill stem tests giving interval tested, time top, 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 ☐ No  
 Cores Taken ☐ Yes ☐ No  
 Electric Log Run ☐ Yes ☐ No  
 (Submit Copy.)  
 List All E-Logs Run:

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

#### 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
2 DP jspf	4" HEC 4188 - 4193	1500 Gal 15% CSA Acid Job
	5 1/2" Bolt Bridge Plug @ 4270	

TESTING RECORD	Size 2 3/8"	Set At 4200'	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
----------------	-------------	--------------	-----------	---

Date of First, Resumed Production, SUD or Inj.	Producing Method
12-3-99	<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 1 Bbls.	Gas 10 Mcf	Water 10 Bbls.	Gas-Oil Ratio 10:1	Gravity
-----------------------------------	-------------	------------	----------------	--------------------	---------

Disposition of Gas: ☐ Vented ☒ Sold ☐ Used on Lease (If vented, submit ACO-18.)  
 METHOD OF COMPLETION: ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Conningled  
☐ Other (Specify) \_\_\_\_\_

Production Interval