

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

Form ACO-1  
September 1999  
Form Must Be Typed

WELL COMPLETION FORM  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32302  
Name: Key Gas Corp.  
Address: 155 N. Market Suite 900  
City/State/Zip: Wichita, KS 67202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Rod Andersen  
Phone: (316) 265-2270  
Contractor: Name: \_\_\_\_\_  
License: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion:  
☒ New Well ☐ Re-Entry ☐ Workover  
☐ Oil ☐ SWD ☐ SIOW ☐ Temp. ☐ AOD  
☒ 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. \_\_\_\_\_

10-23-03  
Spud Date or  
Recompletion Date  
Date Reached TD  
Completion Date or  
Recompletion Date

API No. 15 - 023-20621-00-00  
County: Cheyenne  
C NW Sec. 4 Twp. 2 S. R. 41 ☐ East ☒ West  
1320 feet from S (N) (circle one) Line of Section  
1320 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE (NW) SW  
Lease Name: Ochsner Well #: 17  
Field Name: Cherry Creek  
Producing Formation: Niobrara  
Elevation: Ground: 3505 Kelly Bushing: 3510  
Total Depth: 1652 Plug Back Total Depth: 1597  
Amount of Surface Pipe Set and Cemented at 256 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

(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used Evaporate & Fill

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

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: Rod Andersen

Title: Geologist Date: 7/28/04

Subscribed and sworn to before me this 29<sup>th</sup> day of July

2004

Notary Public: Bonita Danner

Date Commission Expires: 3-17-08

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes ☐ Date: \_\_\_\_\_

BONITA DANNER Wireline Log Received  
NOTARY PUBLIC Geologist Report Received  
STATE OF KANSAS  
My App. Exp. 3-17-08 PIC Distribution



Operator Name: Key Gas Corp. Lease Name: Oehner Well #: 17  
 Sec. 4 Twp. 2 S. R. 41 ☐ East ☒ West County: Cheyenne

**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 Porosity  
 Dual Induction

☒ Log Formation (Top), Depth and Datum ☐ Sample  
 Name Top Datum  
Niobrara 1454 +2104

### 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	# Sacs Used	Type and Percent Additives
Surface	12 $\frac{1}{4}$	7	24	256	Common	110	
Production	7 7/8	4 $\frac{1}{2}$		1631	Lt/50/50	200	

### 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
4	1454-90	100,000# Nitrogen/sdfrac	

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Enhr.	Producing Method <input 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
	70 MCF

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled	
	<input type="checkbox"/> Other (Specify)	