

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

Operator: License # 5652Name: Mustang Oil & Gas Corp.Address 155 N. Market, #350City/State/Zip Wichita, KS 67202Purchaser: River CityOperator Contact Person: Stan BradyPhone (316) 267-8011

Contractor: Name: _____

License: _____

Wellsite Geologist: _____

Designate Type of Completion

☐ New Well ☐ Re-Entry ☒ Workover

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> SIOW	<input type="checkbox"/> Temp. Abd.
<input type="checkbox"/> Gas	<input type="checkbox"/> ENHR	<input type="checkbox"/> SIGW	
<input type="checkbox"/> Dry	<input type="checkbox"/> Other (Core, WSW, Expl., Cathodic, etc)		

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

Operator: Mustang Oil & Gas Corp.Well Name: Tucker 1-34Comp. Date 2-17-87 Old Total Depth 5550'

<input checked="" type="checkbox"/> Deepening	<input checked="" type="checkbox"/> Re-perf.	<input type="checkbox"/> Conv. to Inj/SWD
<input type="checkbox"/> Plug Back		<input type="checkbox"/> PBD
<input type="checkbox"/> Commingled	Docket No. _____	
<input type="checkbox"/> Dual Completion	Docket No. _____	
<input type="checkbox"/> Other (SWD or Inj?)	Docket No. _____	

12-12-92

Date Reached TD _____ Completion Date _____

Recompl. _____

API NO. 15-

County Stanton
C NE SE Sec. 34 Twp. 30S Rge. 41 X E
1980 Feet from SW (circle one) Line of Section660 Feet from EW (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)Lease Name Tucker Well # 1-34Field Name South BeauchampProducing Formation KeyesElevation: Ground 3393' KB 3403'Total Depth 5550' PBD 5432'

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 6-1-83
(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 Stan BradyTitle Vice President Date 12-28-92Subscribed and sworn to before me this 28th day of December, 19 92.Notary Public Kandy HansonDate Commission Expires 11-6-94

KANDY HANSON
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 11-6-94

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

Distribution

KCC _____ SWD/Rep _____
KGS _____ Plug _____

RECEIVED
STATE CORPORATION COMMISSION
NGPA
HAR
(Specify) 1992

STATE OF KANSAS - CORPORATION COMMISSION
MULTIPOINT BACK PRESSURE TEST

FORM C-1

25-30-41W

TYPE TEST: ☒ Initial ☐ Annual ☒ Special TEST DATE: 3-10-87

COMPANY: Mustang Companies LEASE: Tucker WELL NO.: 1-34

COUNTY: Stanton LOCATION: 25-34 TWP: 30S RND: 41W ACRES:

FIELD: Keyes PIPELINE CONNECTION: DRL 01-03-08

COMPLETION DATE: 2-17-87 PLUG BACK TOTAL DEPTH: PACKER SET AT: 5391

CASING SIZE: 5 1/2 WT.: 14.0 ID: 5.012 SGT AT: PERF. TO: 5422 - 5430

TUBING SIZE: 2 7/8 WT.: 6.5 ID: 2.441 SET AT: PERF. TO:

TYPE COMPLETION (Describe): Single Gas TYPE FLUID PRODUCTION: Water

PRODUCING THRU: Tubing RESERVOIR TEMPERATURE: BAR PRESS - P_a: 14.4 psia

CAS GRAVITY - G_g: .720 est. % CARBON DIOXIDE: % NITROGEN: API GRAVITY OF LIQUID:

VERTICAL DEPTH (ft): 5426 TYPE METER CONN.: (METER RUN) (PROVER) SIZE: XX 2"

REMARKS

* P_w calculated from P_r

OBSERVED DATA

DURATION OF SHUT-IN: 91.5 hr.

RATE NO.	ORIFICE SIZE in.	(METER) (PROVER) PRESSURE psig	DIFF. (h _w) (h _d)	FLOWING TEMP. t	WELL-HEAD TEMP. t	CASING WELL-HEAD PRESS.		TUBING WELL-HEAD PRESS.		DURATION HOURS	LIQUID PROD. bbls.
						psig	(P _w)(P _i)(P _e) psia	psig	(P _w)(P _i)(P _e) psia		
SHUT IN						PKR		717	731.4	91.5	
1	5/8	53		26		*626.2	640.6	626	640.4	45 min	0
2	5/8	97		35		*510.8	525.5	510	524.4	45 min	0
3	5/8	103		39		*456.0	470.4	455	469.4	45 min	0
4	5/8	126		48		*396.7	411.1	395	409.4	45 min	0
5											

RATE OF FLOW CALCULATIONS

RATE NO.	COEFFICIENT (F _o)(F _p) Mcfd	(METER) (PROVER) PRESSURE psia	EXTENSION $\sqrt{P_m \times h_w}$	GRAVITY FACTOR F _g	FLOWING TEMP. FACTOR F _t	DEVIATION FACTOR F _{pv}	RATE OF FLOW Q Mcfd	GOR	Q _m
1	6.638	67.4		1.179	1.034	1.000	545		
2	6.638	111.4		1.179	1.025	1.000	893		
3	6.638	117.4		1.179	1.021	1.000	938		
4	6.638	140.4		1.179	1.012	1.018	1132		
5									

PRESSURE CALCULATIONS

RATE NO.	P _i psia	P _e psia	P _w psia	(P _e) ² THOUSANDS	(P _w) ² THOUSANDS	PLOTING POINTS		% SHUT-IN $100 \left[\frac{P_w - P_a}{P_e - P_a} \right]$
						(P _e) ² - (P _w) ² THOUSANDS	Q Mcfd	
1	640.4	731.4	*640.6	534.9	410.3	124.6	545	.876
2	524.4	731.4	*525.5	534.9	276.2	258.7	893	.718
3	469.4	731.4	*470.4	534.9	221.3	313.6	938	.643
4	409.4	731.4	*411.1	534.9	169.0	365.9	1132	.559
5								

INDICATED WELL-HEAD OPEN FLOW: 1432 Mcfd @ 14.62 psia "n" = 0.620

The undersigned authority, on behalf of the Company, states that he is duly authorized to make the above report and that he has knowledge of the facts stated therein, and that said report is true and correct.

Executed this the 11th day of March, 19 87.

John H. Linner
HOSCO Operating, Inc.

Witness (if any)

For Commission

KANSAS GEOLOGICAL SURVEY
WICHITA BRANCH

Albert J. Kasper
Checked by

MAR 13 1987