

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE  
6236

Operator: License # \_\_\_\_\_

Name: MIM PETROLEUM, INC.Address P.O. BOX 82City/State/Zip SPIVEY, KS 67142

Purchaser: \_\_\_\_\_

Operator Contact Person: MARVIN A. MILLERPhone (316) 532-3794Contractor: Name: PICKRELL DRILLING CO., INC.License: 5123Wellsite Geologist: LARRY RICHARDSON

## Designate Type of Completion

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

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

## If Workover:

Operator: MULL DRILLING CO., INC.Well Name: WASHBURN #1Comp. Date 4-7-56 Old Total Depth 4504

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

7-13-99 7-15-99 7-28-99  
Spud Date Date Reached TD Completion Date

API NO. 15- 095-00018-00-01County KINGMAN\_\_\_\_ C \_\_\_\_ NW \_\_\_\_ SE \_\_\_\_ Sec. 35 Twp. 30S Rge. 8 X E W1980 Feet from S/N (circle one) Line of Section1980 Feet from E/W (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)Lease Name AHLF A Well # 2Field Name SPIVEY-GRABS-BASILProducing Formation MISSISSIPPIANElevation: Ground 1662' KB 1664'Total Depth 4502 PBDT existing @ 160'Amount of Surface Pipe Set and Cemented at see letter 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 OWWO 8/17/01 AB  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_ ppm Fluid volume \_\_\_\_ bbls

Dewatering 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. 8 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 8-6-99Subscribed and sworn to before me this 6th day of AUGUST, 19 99.Notary Public *Kathy Hill*Date Commission Expires 01-04-2003

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 *IOG* (Specify)

Operator Name: MM PETROLEUM, INC.Lease Name: AHLE AWell # 2Sec. 35 Twp. 30S Rge. 8W☐ East  
☒ WestCounty KINGMAN

INSTRUCTIONS: Show important tops and base of formations penetrated. Report all drill stem tests giving interval tested, time tool open and closed, flowing and shut-in pressures, shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rate of 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 ☒ NoElectric Log Run  
(Submit Copy.)☒ Yes ☒ No

List All Logs Run:

RADIATION GUARD LOG  
SONIC CEMENT BOND LOG☐ Log Formation (Top), Depth and Datum☐ Sample

Name

Top

Datum

SEE ORIGINAL COMPLETION CARD

## CASING RECORD

☐ Not ☒ 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
EXISTING SURFACE		8 5/8"		160'	SEE PLUGGING RECORD		
PRODUCTION	7 7/8	5 1/2"	14#	4496'	AA2 BLEND	100 sks	363 FLA
						3.553 GILSONITE/sk	

## 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 DPB PF	4424-4426 7-26-99		
2 DPB PF	4390-4394 7-27-99		
TUBING RECORD		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Size 2 3/8"		Set At 4413'	
Date of First, Retained Production, SLD or Inj.		Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Noncommercial			
Estimated Production Per 24 Hours	Oil Bbls. Non-commercial	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity
			N/A

Disposition of Gas: METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease  
(If vented, submit ACO-18.)☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify) \_\_\_\_\_