

WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

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Operator: License # 5171 .....
Name ..... TXO PRODUCTION CORP.
Address ..... 200 W. Douglas, Suite 300
City/State/Zip ..... Wichita, KS 67202
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Operator Contact Person Harold R. Trapp
Phone 316-265-9441, Ext. 261

Contractor: License # 6165
Name FWA Drilling Co., Inc.

Wellsite Geologist.....William J. Stobbe.....
Phone.....316-722-9327.....

dry hole RECEIVED
PURCHASER..... STATE CORPORATION COMMISSION

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover

☐ Oil	☐ SWD	☐ Temp Abd	☐ Wic
☐ Gas	☐ Inj	☐ Delayed Comp.	
☒ Dry	☐ Other (Core, Water Supply etc.)		

If OWWO: old well info as follows:

Operator

Well Name

Comp. DateOld Total Depth.....

WELL HISTORY

Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

...9-14-84... 9-19-84..... 9-20-84.....

Spud Date	Date Reached TD	Completion Date
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3940'	n/a
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Total Depth	PBTD
100	100
200	200
300	300
400	400
500	500
600	600
700	700
800	800
900	900
1000	1000
1100	1100
1200	1200
1300	1300
1400	1400
1500	1500
1600	1600
1700	1700
1800	1800
1900	1900
2000	2000
2100	2100
2200	2200
2300	2300
2400	2400
2500	2500
2600	2600
2700	2700
2800	2800
2900	2900
3000	3000
3100	3100
3200	3200
3300	3300
3400	3400
3500	3500
3600	3600
3700	3700
3800	3800
3900	3900
4000	4000
4100	4100
4200	4200
4300	4300
4400	4400
4500	4500
4600	4600
4700	4700
4800	4800
4900	4900
5000	5000
5100	5100
5200	5200
5300	5300
5400	5400
5500	5500
5600	5600
5700	5700
5800	5800
5900	5900
6000	6000
6100	6100
6200	6200
6300	6300
6400	6400
6500	6500
6600	6600
6700	6700
6800	6800
6900	6900
7000	7000
7100	7100
7200	7200
7300	7300
7400	7400
7500	7500
7600	7600
7700	7700
7800	7800
7900	7900
8000	8000
8100	8100
8200	8200
8300	8300
8400	8400
8500	8500
8600	8600
8700	8700
8800	8800
8900	8900
9000	9000
9100	9100
9200	9200
9300	9300
9400	9400
9500	9500
9600	9600
9700	9700
9800	9800
9900	9900
10000	10000

Amount of Surface Pipe Set and Cemented at.....feet
8-5/8" @ 390'

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set.....feet

If alternate 2 completion, cement circulated
from.....feet depth to.....w/.....SX cmt

live line log received

API NO. 15-007-21,913

County.....Barber.....

150' S SE SE Sec. 26 Twp. 31S Rge. 11W ☐ East
☒ West

..... Ft North from Southeast Corner of Section
..... Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

Lease Name.....Chapin-Smith "A".....Well #.....1.....

Field Name.....McReynolds S.W.

Producing Formation.....Dry Hole

Elevation: Ground... 1691' KB... 1702'

Section Plat

Figure 1 is a 10x10 grid representing the spatial distribution of fish. The vertical axis (left) and horizontal axis (bottom) are both labeled with values: 330, 660, 990, 1320, 1650, 1980, 2310, 2640, 2970, 3300, 3630, 3960, 4290, 4620, 4950, and 5280. The grid contains a sparse distribution of dots, each representing a fish. The dots are more concentrated in the upper-left area of the grid and become sparser towards the lower-right area.

* WATER SUPPLY INFORMATION

Source of Water:

Division of Water Resources Permit # n/a.....

☐ Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge ☐ East ☐ West

☐ Surface Water.....Ft North from Southeast Corner
(Stream,pond etc).....Ft West from Southeast Corner

Sec Twp Rge ☐ East ☐ West

☐ Other (explain)
(purchased from city, R.W.D.#)

Disposition of Produced Water: ☐ Disposal
☐ Repressuring

Docket # NONE

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

SIDE TWO

Operator Name TXO PROD. CORP. Lease Name Chapin-Smith "A" #1 Well # 26 SEC. 31S TWP. 11W RGE. ☐ East ☒ West

WELL LOG

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 ☒ Yes ☐ No
 Samples Sent to Geological Survey ☒ Yes ☐ No
 Cores Taken ☐ Yes ☒ No

Formation Description
☒ Log ☐ Sample

DST #1, 3753-93', Toronto
 IFP/30"=51-129#, weak blow.
 ISIP/60"=1334#
 FFP/45"=207-259#, fair blow.
 FSIP/90"=1321#
 Rec: 520' SW

Ran O. H. Logs

Name	Top	Bottom
Herington	1902	-200
Onaga Sh	2708	-1006
Indian Cave	2716	-1014
Wab	2758	-1056
Stotler	2904	-1202
Tarkio Ls	2974	-1272
Topeka	3178	-1476
Elgin Sh	3530	-1828
Heebner	3706	-2004
Douglas Ls	3751	-2049
L. Doug Ss	3820	-2118
Brown Ls	3886	-2184
Lansing	3891	-2189
LTD	3936	
RTD	3940	

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
SURFACE.....	11"	8-5/8"	24"	390'	w/250 sxs	Class A	
PRODUCTION.....		DRY HOLE-NONE			PLUGGED	w/120 sxs	

PERFORATION RECORD

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
None		None	

TUBING RECORD	Size none	Set At	Packer at	Liner Run	☐ Yes ☒ No
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Date of First Production	Producing Method
D&A	☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (explain).....

	Oil	Gas	Water	Gas-Oil Ratio	Gravity
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