

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

```
Operator: License # ..5673.....
      Name ..W.L. Kirkman.....
      Address P.O. Box 782290.....
              9440 Boston.....
      City/State/Zip ...Wichita, Ks..7278-2290
```

|                |                         |
|----------------|-------------------------|
| Purchaser..... | Clear Creek & Shut..... |
|                | In gas well.....        |

Operator Contact Person Mike Kirkman.....  
Phone 316-672-7471.....

Contractor: License # ..5122.....KANS  
Name ..Woodman - Lannitti.....

Wellsite Geologist.....None.....  
Phone.....

Designate Type of Completion

|          |                                              |                                   |
|----------|----------------------------------------------|-----------------------------------|
| New Well | <input checked="" type="checkbox"/> Re-Entry | <input type="checkbox"/> Workover |
|----------|----------------------------------------------|-----------------------------------|

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

If OWWO: old well info as follows:

|                 |                          |
|-----------------|--------------------------|
| Operator        | E. K. Carey Drilling Co. |
| Well Name       | Swarner #1               |
| Comp. Date      | 3/19/58                  |
| Old Total Depth | 5250'                    |

### WELL HISTORY

Drilling Method:

☒ Mud Rotary      ☐ Air Rotary      ☐ Cable

|              |                 |                 |
|--------------|-----------------|-----------------|
| ..4-15-88... | ..4-16-88....   | ..4-22-88...    |
| Spud Date    | Date Reached TD | Completion Date |
| ..5233.88    | ..5200.....     |                 |
| Total Depth  | PBTD            |                 |

Amount of Surface Pipe Set and Cemented at.....feet  
Multiple Stage Cementing Collar Used? \_\_\_ Yes X No  
If yes, show depth set.....feet  
If alternate 2 completion, cement circulated  
from.....feet depth to.....w/.....SX cmt  
Cement Company Name .....  
Invoice # .....

API NO. 15-.....033-01007.....

County.....Comanche.....

County..... 17 (DRL, 1-25-2006) East  
NW NW NW Sec. ~~X~~ Twp. 31S, Rge. 18.. ~~X~~ West

...<sup>4950</sup>..... Ft North from Southeast Corner of Section  
 ...<sup>4950</sup>..... Ft West from Southeast Corner of Section  
 (Note: Locate well in section plat below)

Lease Name.....Swarner.....Well #.....1.....

Field Name.....Wildcat.....

Producing Formation.....Marmation.....

Elevation: Ground. 2206.....KB. 2212.....

### Section Plot

|   |      |
|---|------|
| X | 5280 |
|   | 4950 |
|   | 4620 |
|   | 4290 |
|   | 3960 |
|   | 3630 |
|   | 3300 |
|   | 2970 |
|   | 2640 |
|   | 2310 |
|   | 1980 |
|   | 1650 |
|   | 1320 |
|   | 990  |
|   | 660  |
|   | 330  |

## WATER SUPPLY INFORMATION

|                                |              |
|--------------------------------|--------------|
| Disposition of Produced Water: | Disposal     |
| Docket # .....                 | Repressuring |

Questions on this portion of the ACC-1 call:

Water Resources Board (913) 296-3717

Source of Water:  
Division of Water Resources Permit #.....

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 |
|-----|-----|-----|------|------|
|-----|-----|-----|------|------|

X Other (explain) Great Plains Fluid  
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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.

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 ..... Michael W. Kirkman *Michael W. Kirkman*

Title..... *Field Supervisor* ..... Date *12/13/88*

Subscribed and sworn to before me this 13 day of December

Notary Public.....*Alene Kena*.....

Date Commission Expires.....10/07/90.....

## K.C.C. OFFICE USE ONLY

F ☐ Letter of Confidentiality Attached  
C ☐ Wireline Log Received  
C ☐ Drillers Timelog Received

### Distribution

|                                         |                                  |                                |
|-----------------------------------------|----------------------------------|--------------------------------|
| <input checked="" type="checkbox"/> KCC | <input type="checkbox"/> SWD/Rep | <input type="checkbox"/> NGPA  |
| <input type="checkbox"/> KGS            | <input type="checkbox"/> Plug    | <input type="checkbox"/> Other |
|                                         |                                  | (Specify)                      |

Operator Name W.L. Kirkman Lease Name Swarner Well # 1Sec. 17 Twp. 31S Rge. 18 ☐ East ☐ West County Comanche

## 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

| Name          | Top  | Bottom |
|---------------|------|--------|
| Heebner       | 4280 | -2265  |
| Toronto       | 4300 | -2085  |
| Douglas Shale | 4316 | -2101  |
| Brown Lime    | 4453 | -2238  |
| Lansing-KC    | 4470 | -2255  |
| Base KC       | 4852 | -2637  |
| Marmaton      | 4878 | -2663  |
| Cherokee      | 5068 | -2853  |
| Mississippi   | 5139 | -2924  |
| RTD           | 5250 | -3035  |

| CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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                                                                   |                                             | 8 5/8                                                                                                                                                                         |                | 489                                                                           | Dosmix         | 325         | 2% gel                     |
| production                                                                | 7 7/8                                       | 5 1/2                                                                                                                                                                         | 15.5           | 4097-5230                                                                     | 60140          | 200         | 2% gel-3/4 of              |
| " "                                                                       | "                                           | "                                                                                                                                                                             | 14#            | KB-4097                                                                       | pozmix         |             | 1% CER-2-10% salt          |
| PERFORATION RECORD                                                        |                                             |                                                                                                                                                                               |                | Acid, Fracture, Shot, Cement Squeeze Record                                   |                |             |                            |
| Shots Per Foot                                                            | Specify Footage of Each Interval Perforated |                                                                                                                                                                               |                | (Amount and Kind of Material Used)                                            |                | Depth       |                            |
| 4 shots                                                                   | 4985 to 4989                                |                                                                                                                                                                               |                | 1000 gallons 15% N.E.                                                         |                |             |                            |
| TUBING RECORD                                                             |                                             |                                                                                                                                                                               |                | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                |             |                            |
| Size                                                                      |                                             | Set At                                                                                                                                                                        |                | Packer at                                                                     |                |             |                            |
| 2 3/8                                                                     |                                             | 4993.67                                                                                                                                                                       |                | No                                                                            |                |             |                            |
| Date of First Production                                                  |                                             | Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain)..... |                |                                                                               |                |             |                            |
| Shut in gas well                                                          |                                             |                                                                                                                                                                               |                |                                                                               |                |             |                            |
| Estimated Production Per 24 Hours                                         |                                             | Oil                                                                                                                                                                           | Gas            | Water                                                                         | Gas-Oil Ratio  | Gravity     |                            |
|                                                                           |                                             | Bbls                                                                                                                                                                          | MCF            | Bbls                                                                          | CFPB           |             |                            |

## METHOD OF COMPLETION

Production Interval

Disposition of gas: ☐ Vented  
☒ Sold  
☐ Used on Lease

☐ Open Hole ☒ Perforation  
☐ Other (Specify) .....

☐ Dually Completed  
☐ Commingled