

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

COPY

One

Operator: License # 4548
Name: ONEOK RESOURCES CO.
Address: P.O. BOX 871
City/State/Zip: TULSA, OK 74102-0871
Purchaser: ONEOK MIDSTREAM GAS SUPPLY LLC
Operator Contact Person: DARYL DUVALL
Phone: (918) 588-7711
Contractor: Name: CHEYENNE DRILLING
License: 5382
Wellsite Geologist: HAROLD TRAPP

Designate Type of Completion:

- New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 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. _____

01/05/01 01/18/01 04/23/01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - ⁰³³~~003~~-21136 0000
County: COMANCHE

SW NW NE Sec. 13 Twp. 31 S. R. 18 East West
1050 feet from S (N) (circle one) Line of Section
2350 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW
Lease Name: PYLE Well #: 5-13

Field Name: WILMORE
Producing Formation: MISSISSIPPI

Elevation: Ground: 2072 Kelly Bushing: 2084
Total Depth: 5182 Plug Back Total Depth: 5126

Amount of Surface Pipe Set and Cemented at 730 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 75000 ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite:

Operator Name: SEE ATTACHED SHEETS

Lease Name: _____ License No.: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Docket No.: _____

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STATE CORPORATION COMMISSION

APR 26 2001

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: Daryl Duvall

Title: District Engineer Date: 4/23/01

Subscribed and sworn to before me this 23rd day of April

2001
Notary Public: Shereca Dreller

Date Commission Expires: 12-18-01

KCC Office Use ONLY

- Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

Operator Name: ONEOK RESOURCES CO. Lease Name: PYLE Well #: 5-13
 Sec. 13 Twp. 31 S. R. 18 East West County: COMANCHE

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets) Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy) List All E. Logs Run: High Definition Induction Log, Gamma Ray, Caliper Log, Compensated Z-Densilog, Compensated Neutron, Minilog, Sonic Cement Bond	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum See Attached Sheet
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CASING RECORD <input checked="" 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
Conductor	24	20	94	59	Grout	3 yds	
Surface	12.25	8.625	24	730	Prem Plus	290	2% CC
Production	7.875	4.5	11.6	5183	Prem Plus	275	5% KCL

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
		Amount	Kind	
5	5025-5030 Mississippi	500gals 15% Double FE & 20bbls 2% KCL		
		1000gal 15% NEFE acid w/20 ball sealers,		
		40 bbls 2% KCL		

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2-3/8"	5113			
Date of First, Resumed Production, SWD or Enhr.			Producing Method			
4/27/01			<input type="checkbox"/> Flowing <input checked="" 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	
	20	50	7	2.5/1		

Disposition of Gas **METHOD OF COMPLETION** Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
 (If vented, Sumit ACO-18.) Other (Specify) _____

COPY

FORMATIONS FOR THE PYLE 5-13

Name	Top	Datum
Heebner	4178	2094
Toronto	4192	2108
Lansing	4354	2270
Iola	4540	2456
BKC	4787	2703
Marmaton	4796	2712
Pawnee	4888	2804
Mississippi	4994	2910
TD	5182	3098