

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

6528

Operator: License #

R.J. Patrick Operating Company

Address: PO Box 1157

Liberal, Kansas 67905-1157

Purchaser:

Operator Contact Person: R.J. Patrick

Phone: (620) 624-8483

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: Bob Posey

Designate Type of Completion:

X 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

Jg Back Plug Back Total Depth

Commingled Docket No.

Dual Completion Docket No.

Other (SWD or Enhr.?) Docket No.

16-15-01 06-27-01 07-21-01
Spud Date or Date Reached TD Completion Date or Recompletion Date

033-21233-0000

API No. 15 -

County: Comanche County, Kansas

NW NW NE/4 Sec. 4 Twp. 32 S. R. 19 East West

330 feet from S / N (circle one) Line of Section

2310 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Inez Bean Well #: 2-4

Field Name: Wildcat

Producing Formation:

Elevation: Ground: 2119' Kelly Bushing: 2130'

Total Depth: 5373' Plug Back Total Depth: 5325

Amount of Surface Pipe Set and Cemented at 668 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 668

feet depth to surface w/ 225 sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content 9,000 ppm Fluid volume 650 bbls

Dewatering method used settled water & hauled

Location of fluid disposal if hauled offsite:

Operator Name: KBW Oil & Gas Company

Lease Name: Harmon SWD License No.: 5993

Quarter NW Sec. 11 Twp. 33 S. R. 20 East West

County: Comanche Docket No.: 22304

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.

I 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: R.J. Patrick
Title: Owner Date: 7-23-01

Subscribed and sworn to before me this 23 day of July

2001

Notary Public: Jayne Berry
Notary Commission Expires: 04-04-04

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes Date: _____

Wireline Log Received

Geologist Report Received

Urgent Distribution



Operator Name: R.J. Patrick Operating Company Lease Name: Inez Bean Well #: 2-4
 Sec. 4 Twp. 32 S. R. 19 East West County: Comanche County, Kansas

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 (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name Lansing Top 4574 Datum -2425	
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No	Swope 4880 -2731	
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Marmaton 5040 -2891	
List All E. Logs Run: Dual Induction - Dual Compensated Porosity - Micro - Compensated Sonic and Geological Log.		Ft. Scott 5151 -3002	
		Cherokee Shale 5162 -3013	
		Mississippian 5240 -3091	

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	# Sacs Used	Type and Percent Additives
Conductor	17-1/2"	20"	48#	80'	Acon&common	110/100	3%cc 2%gel
Surface	12-1/4"	8-5/8"	23#	668'	Acon&common	125/100	2%cc
Production	7-7/8"	4-1/2"	10.5#	5373'	50/50 Poz	250	18%salt

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives	

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
2	5298 to 5310	1500 Gal MCA	5298
	CIBP Set @ 5280		
4	4768 to 4774	2000 Gal 15%	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	2 3/8	4707	4715			

Date of First, Resumed Production, SWD or Enhr.	Producing Method	<input type="checkbox"/> Flowing	<input type="checkbox"/> Pumping	<input type="checkbox"/> Gas Lift	<input type="checkbox"/> Other (Explain)
No Production (Further procedure pending).					

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water	Bbls.	Gas-Oil Ratio	Gravity
	0	0	100			

Disposition of Gas	METHOD OF COMPLETION	Production Interval

<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Sumit ACO-18.)	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled _____
	<input type="checkbox"/> Other (Specify) _____