

COPY

SIDE ONE

DEC

CONFIDENTIAL

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

Operator: License # 7186
Name: DOCKING DEVELOPMENT CO.
Address P.O. Box 928
Arkansas City, KS 67005
City/State/Zip _____
Purchaser: D&A
Operator Contact Person: Larry Bartleson
Phone (316) 455-3644

Contractor: Name: ALLEN DRILLING COMPANY

License: 5418 STATE CORPORATION COMMISSION

Wellsite Geologist: Steve Davis

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover CONSERVATION DIVISION
☐ Oil ☐ SWD ☐ Temp. Abd.
☐ Gas ☐ Inj ☐ Delayed Comp.
☒ Dry ☐ Other (Core, Water Supply, etc.)

If OWD: old well info as follows:

Operator: N/A

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

10/16/91 10/24/91 10/25/91
Spud Date Date Reached TD Completion Date

API NO. 15- 191-22,193

County Sumner

NE NW SE Sec. 19 Twp. 32 Rge. 2 ☒ East West

2310 Ft. North from Southeast Corner of Section

1650 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

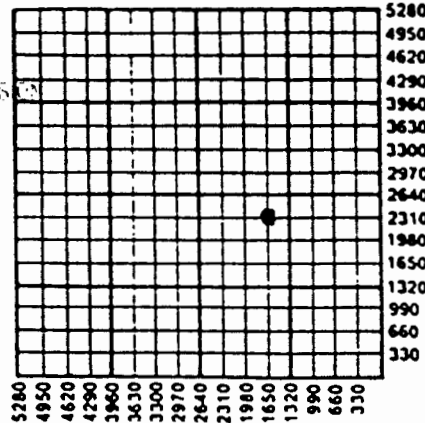
Lease Name LIPE Well # 1

Field Name _____

Producing Formation D&A

Elevation: Ground 1235 KB 1240

Total Depth 4281 PBTD --



Amount of Surface Pipe Set and Cemented at 300' 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 cnt.

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. ALL CEMENTING TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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.

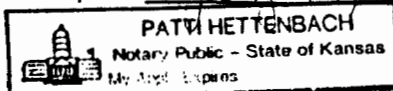
Signature P. H. Hattenbach

Title Notary Public - State of Kansas Date 12/15/91

Subscribed and sworn to before me this 2nd day of December 1991.

Notary Public Patricia Hattenbach

Date Commission Expires July 15, 1995



K.C.C. OFFICE USE ONLY		
F	☒	Letter of Confidentiality Attached
C	☐	Wireline Log Received
C	☒	Drillers Timelog Received
Distribution		
☒ KCC	☐ SWD/Rep	☐ NGPA
☒ KGS	☐ Plug	☐ Other (Specify)

SIDE TWO

Operator Name DOCKING Development Co. Lease Name LIPE Well # 1Sec. 19 Twp. 32 Rge. 2
☐ East
☒ WestCounty Sumner

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
(Attach Additional Sheets.)Samples Sent to Geological Survey ☐ Yes ☐ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☐ Yes ☒ No
(Submit Copy.)

Formation Description

☐ Log ☒ Sample

Name

Top

Bottom

SEE ATTACHED

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	12-1/4"	8-5/8"	20#	300'	common	225	3%cc

PERFORATION RECORD

Shots Per Foot Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record
(Amount and Kind of Material Used) Depth

TUBING RECORD

Size

Set At

Packer At

Liner Run

☐ Yes ☐ No

Date of First Production

Producing Method

☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)Estimated Production
Per 24 Hours

Oil

Bbls.

Gas

Mcf

Water

Bbls.

Gas-Oil Ratio

Gravity

Disposition of Gas:

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

METHOD OF COMPLETION

Production Interval

☐ Open Hole ☐ Perforation ☐ Dually Completed ☐ Conningled
☐ Other (Specify) _____