

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 5952
Name: BP AMERICA PRODUCTION COMPANY
Address: P. O. BOX 3092, WLL, RM 3.201
City/State/Zip: HOUSTON, TX 77253-3092
Purchaser: _____
Operator Contact Person: SUE SELLERS
Phone (281) 366-2052
Contractor: Name: CHEYENNE DRILLING
License: 5382
Wellsite Geologist: _____

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/Reentry: 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. _____

9/22/03 9/24/03 10/10/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API NO. 15- 129-21706-0000
County MORTON
SE - NW - SE - SE Sec. 15 Twp. 32 S. R. 40 ☐ E ☒ W
1200 S Feet from SW (circle one) Line of Section
1250 E Feet from EW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name EVANS B Well # 3HI
Field Name HUGION
Producing Formation CHASE
Elevation: Ground 3325' Kelley Bushing 3332'
Total Depth 2623' Plug Back Total Depth 2623'
Amount of Surface Pipe Set and Cemented at 642 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 3400 MG/L ppm Fluid volume 700 bbls

Dewatering method used DRIED AND FILLED

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ E ☐ W

County _____ Docket No. _____

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 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 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 Sue Sellers

Title STAFF ASSISTANT Date 11/12/03

Subscribed and sworn to before me this 12TH day of NOVEMBER

20 03

Notary Public HELENE KAPALAC

Date Commission Expires MAY 26, 2006

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

Operator Name **BP AMERICA PRODUCTION COMPANY**Lease Name **EVANS 'B'**Well # **3HI**Sec. **15** Twp. **32** S.R. **40** ☐ East ☒ WestCounty **MORTON**

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 all Electric Wireline Logs surveyed. Attach final geological well site report.

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

List All E.Logs Run:

COMPENSATED SPECTRAL NATURAL GAMMA☒ Log

Formation (Top), Depth and Datums

☐ Sample

Name

Top

Datum

CHASE**2266'****KB****COUNCIL GROVE****2550'****KB**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 3/8"	24#	642'	HLC PP	170	3%CC 1/4#FLO
					PREM PLUS	125	2%CC 1/4#FLO
PRODUCTION	7 7/8"	4 1/2"	10.5#	2625'	HLC PP	525	1/4# FLOCELE

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
4	2278-2288'; 2320-2330'; 2400-2410'; 2450-	FRAC-200,000# OF 16/30 BRADY SAND	2278-2460
	2460	W/70Q FOAM	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2 3/8"	2475'	N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumed Production, SWD or Enhr.	Producing Method
10/10/03	<input checked="" type="checkbox"/> Flowing <input 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
	0	400	0		

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease ☐ Open Hole ☒ Perforation ☐ Dually Comp. ☐ Commingled

(If vented, submit ACO-18.)

☐ Other (Specify)