

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1  
September 1999  
Form Must Be Typed

ORIGINAL

Operator: License # 5044  
Name: White Pine Petroleum Corporation  
Address: 107 North Market - Suite 800  
City/State/Zip: Wichita, Kansas 67202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Wilbur C. Bradley  
Phone: ( 316 ) 262-5429  
Contractor: Name: Duke Drilling Co., Inc.  
License: 5929  
Geologist: M. Bradford Rine  
Signature Type of Completion:  
☐ New Well ☐ Re-Entry ☐ Workover  
☐ Oil ☐ SWD ☐ SIOW ☐ Temp. Abd.  
☐ Gas ☐ ENHR ☐ SIGW  
☒ Dry ☐ Other (Core, WSW, Exposed, Cathodic, etc.)  
Workover/Re-entry: Old Well Info as follows:  
Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Final 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. \_\_\_\_\_  
5-11-02 05-24-02 5-25-02  
Date of Completion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - 007-22705-00-00  
County: Barber County, Kansas  
NE SE NW Sec. 2 Twp. 33 S. R. 15 ☐ East ☒ West  
3630 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: DeGeer Well #: 1  
Field Name: \_\_\_\_\_  
Producing Formation: \_\_\_\_\_  
Elevation: Ground: 1977 Kelly Bushing: 1988  
Total Depth: 5260' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 221 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 (See) P+A 247-29-02  
(Data must be collected from the Reserve Pit)  
Chloride content 9000 ppm Fluid volume 1800 bbls  
Dewatering method used Haul water & evaporation  
Location of fluid disposal if hauled offsite: Cole Disposal  
Operator Name: Bemco  
Lease Name: Cole License No.: 32613  
Quarter \_\_\_\_\_ Sec. 25 Twp. 32 S. R. 12 ☐ East ☒ West  
County: Barber Docket No.: D19886

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 82-3-7 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 SHEETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

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: Wilbur C. Bradley  
President Date: 6/28/02  
Subscribed and sworn to before me this 28th day of June, 2002  
Notary Public: Richard A. Pape, Jr.  
Commission Expires: 8/14/2004

KCC Office Use ONLY

☒ Letter of Confidentiality Attached  
If Denied, Yes ☐ Date: \_\_\_\_\_  
☒ Wireline Log Received  
☒ Geologist Report Received  
☐ UTC Distribution

Operator Name: **White Pine Petroleum Corp.** Lease Name: **DeGeer** Well #: **1**  
 Sec. **2** Twp. **33** S. R. **15** ☐ East ☒ West County: **Barber 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 checked="" type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Herington	2299 -311
Electric Log Run (Submit Copy)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Lansing	4292 -2304
Submit All E. Logs Run:		BKC	4710 -2722
		Mississippi	4864 -2876
		Woodford	5131 -3143
		Viola	5170 -3182
		RTD	5268 -3280
Dual Induction			
Dual Compensated Porosity			

CASING RECORD <input type="checkbox"/> New <input checked="" 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
Surface	12-1/4"	10-3/4"	32#	221'	60/40 Poz	200	3%cc 2%gel

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

Size	Set At	Packer At	Liner Run
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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)	
Rated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

Position of Gas	METHOD OF COMPLETION	Production Interval
	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	

Entered ☐ Sold ☐ Used on Lease  
 (If vented, Submit ACO-18.)