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

Operator: License # 5316
Name: FALCON EXPLORATION, INC.
Address: 155 N. MARKET, SUITE 1020
City/State/Zip: WICHITA, KS 67202
Purchaser:
Operator Contact Person: MICHEAL S. MITCHELL
Phone: (316) 262-1378
Contractor: Name: VAL ENERGY
License: 5822
Wellsite Geologist: CRAIG CAULK

KCC
JUL 2 [illegible]
CONFIDENTIAL
RELEASED
JAN [illegible]
FROM CONFIDENTIAL

Designate Type of Completion:
___ New Well ___ Re-Entry ___ Workover
___ Oil ___ SWD ___ SIOW ___ Temp. Abd.
___ Gas ___ ENHR ___ SIGW
XX 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.

3/31/01 — Spud Date or Recompletion Date
4/14/01 — Date Reached TD
___ — Completion Date or Recompletion Date

API No. 15 - 025-21223-0000
County: CLARK
C . SW . NE Sec. 36 Twp. 33 S. R. 24 ☐ East ☒ West
1930 feet from S (N) (circle one) Line of Section
1980 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) (NE) SE NW SW
Lease Name: GARDINER Well #: 1-36
Field Name: KEIGER CREEDK EXT
Producing Formation: ___
Elevation: Ground: 1960' Kelly Bushing: ___
Total Depth: 5660' Plug Back Total Depth: ___
Amount of Surface Pipe Set and Cemented at 696 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)
ALT I D&A 1-6-03 DRW
Chloride content ___ ppm Fluid volume 160 bbls
Dewatering method used HAULED OFFSITE
Location of fluid disposal if hauled offsite:
Operator Name: KBW OIL & GAS
Lease Name: HARMON DISPOSAL License No.: 5993
Quarter ___ Sec. 11 Twp. 33 S. R. 20 ☐ East ☒ West
County: COMMANCHE Docket No.: CD98329

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:
Title: PRESIDENT Date: 7/20/01
Subscribed and sworn to before me this 20TH day of JULY
XX 2001.
ROSANN M. SCHIPPERS
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 9/28/03
Notary Public: Rosann M. Schippers
Date Commission Expires: 9/28/03

KCC Office Use ONLY
✓ Letter of Confidentiality Attached
✓ If Denied, Yes ☐ Date:
✓ Wireline Log Received
___ Geologist Report Received
___ UIC Distribution

Side Two

Operator Name: FALCON EXPLORATION, INC. Lease Name: GARDINER Well #: 1-36

Sec. 36 Twp. 33 S. R. 24 ☐ East ☒ West County: CLARK

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 ☒ Yes ☐ No
(Attach Additional Sheets)

Samples Sent to Geological Survey ☒ Yes ☐ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☒ Yes ☐ No
(Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample

Name	Top	Datum
SEE ATTACHED DRILLINGREPORT FOR FORMATION TOPS AND DST		

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	# Sacjs Used	Type and Percent Additives
CONDUCTOR	30	20"		75'	GROUT	10SX	
SURFACE	1	8 5/8"	24#	696'	LITE	300SX	
				+	150	150SX	3% CC 2% GEL

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

TUBING RECORD Size Set At Packer At

Liner Run ☐ Yes ☐ No

Date of First, Resumerd Production, SWD or Enhr.

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 METHOD OF COMPLETION Production Interval

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

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled _____

☐ Other *(Specify)* _____