

*Handwritten initials*

FORM MUST BE TYPED

SIDE ONE

007-22,429-00-00

**COPY**  
*3134-13W*

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

Operator: License # 31297  
Name: James B. Read Operating, Inc.  
Address: P.O. Box 638  
Ardmore, OK 73402  
City/State/Zip  
Purchaser: KP&L (Rangeline)  
Operator Contact Person: James B. Read  
Phone ( 405 ) 226-0055  
Contractor: Name: Duke Drilling Co., Inc.  
License: 5929  
Wellsite Geologist: Steve Miller  
Lawrence, KS 913/842-8404  
Designate Type of Completion  
 New Well  Re-Entry  Workover

Oil  SVD  S10W  Temp. Abd.  
 Gas  ENHR  SIGV  
 Dry  Other (Core, WSV, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Inj/SVD  
 Plug Back  PBTB  
 Commingled Docket No. \_\_\_\_\_  
 Dual Completion Docket No. \_\_\_\_\_  
 Other (SVD or Inj?) Docket No. \_\_\_\_\_  
12-30-93 01-09-94 01-27-94  
Spud Date Date Reached TD Completion Date

API NO. 15- \_\_\_\_\_  
County Barber  
C S 12 NW SE NE - \_\_\_\_\_ Sec. 31 Twp. 34 Rge. 13  <sup>E</sup> <sub>W</sub>

1815 Feet from S (circle one) Line of Section  
990 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)

Lease Name Nighswonger Well # 1-31A

Field Name Aetna

Producing Formation Mississippian

Elevation: Ground 1663 KB 1672

Total Depth 5350' PBTB 5274'

Amount of Surface Pipe Set and Cemented at 370 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 ALT 1 & H 6-23-94  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Devastating method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

\_\_\_\_\_ Quarter Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 [Signature]  
Title President Date 2/15/94

Subscribed and sworn to before me this 24th day of FEBRUARY

19 94  
Notary Public [Signature]

Date Commission Expires 7-12-97

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Geologist Report Received  
**RECEIVED**  
STATE CORPORATION COMMISSION  
MAR 21 1994  
Plug  NSPA  
Other (Specify)

Form CONSERVATION DIVISION  
Wichita, Kansas (7-91)

*IS*

Operator Name James B. Read Operating, inc. Lease Name Nighswonger Well # 1-31A

US-4531 34 Rge. 13  East  West

County Barber

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests given 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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input checked="" 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	Heebner Shale	4030	-2358
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Douglas Shale	4105	-2433
List All E.Logs Run:		Lansing	4218	-2546
FD-CNL	Micro Log	Stark Shale	4667	-2995
BHC/Sonic	Bond Log	Mississippian	4843	-3171
IEL		Kinderhook Shale	5150	-3478
		Viola Lime	5289	-3617

CASING RECORD <input checked="" type="checkbox"/> New <input type="checkbox"/> Used Surface Casing - 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	14-3/4"	10-3/4"	32#	370'	60/40 poz	250	2% gel 3% cp.
Production	7-7/8"	4 1/2"	10.5#	5325'	ASC	200	

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	Perforated Interval
2 SPF	4845' to 4866', 21' - 42 shots	Acid - 1500 gal 15% HCS acid	
		Frac Treatment (Serico)	
		47,100 gal 40# X-link gel,	
		62,000# 12/20 sand, & flushed to top perf with	

TUBING RECORD	Size	Set At	Packer At	3235 gal gel Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2-3/8	4818'RKB Inc/SN&Anchor	none	

Date of First, Resumed Production, SWD or Inj.	Producing Method
First production-Gas sales 2/2/94	<input type="checkbox"/> Flowing <input checked="" 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
		370 MCFPD	23 BWPD	None	None

Disposition of Gas:  Vented  Sold  Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Inter \_\_\_\_\_