KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

	Form ACO-1
orm	September 1999 Must Be Typed

Operator: License # 32429 API No. 15 - 033-21,088 County: Comanche CRAWFORD OIL & GAS, INC. Name: App C_S/2 NW NW Sec. 7 Twp. 34 S. R. 18 East X West P. O. Box 51 Address: 985 teet from S /N (circle one) Line of Section Coldwater, Kansas 67029 City/State/Zip: __ EOTT & PRG 620 feet from E / (W) (circle one) Line of Section Purchaser: ____ Operator Contact Person: Mark Pinnick Footages Calculated from Nearest Outside Section Corner: Phone: (316) __582-2612 (circle one) NE SE NW SW DUKE DRILLING CO., INC. Contractor: Name:___ Lease Name: HOFFMAN TRUST Well #: 2 Field Name: Buttermilk East 5929 License: _____ We"-'e Geologist: _____ Jon Christensen Producing Formation: Mississippian Elevation: Ground: 1895 Kelly Bushing: 1906 Designate Type of Completion: X New Well _____ Re-Entry Total Depth: 6100 Plug Back Total Depth: 5527 _____ SWD _____ SIOW _ Amount of Surface Pipe Set and Cemented at ____635 __ Oil ___Temp. Abd. ____ ENHR ___ ___ SIGW Gas Multiple Stage Cementing Collar Used? Yes No If yes, show depth set _____ Other (Core, WSW, Expl., Cathodic, etc) ____ Feet If Workover/Re-entry: Old Well Info as follows: If Alternate II completion, cement circulated from_____ Operator: ___ Well Name: ... **Drilling Fluid Management Plan** Original Comp. Date: _____ Original Total Depth: ____ (Data must be collected from the Reserve Pit) __ Deepening ____ Re-perf. ____Conv. to Enhr./SWD Chloride content 28,000 ppm Fluid volume____ __ Plug Back ___ ____ Plug Back Total Depth haul off Dewatering method used_____ ... Commingled Docket No.___ Location of fluid disposal if hauled offsite: ___ Dual Completion Docket No.___ Operator Name: GORDON KEANE ____ Other (SWD or Enhr.?) Docket No.___ Lease Name: Harmon __ License No.:____ 5993 5/20/00 5/6/00 5/16/00 Quarter NW Sec. 7 Two. 34 S. R. 18 East X West Sour Date or Date Reached TD Completion Date or detion Date Re Recompletion Date Comanche 22304 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, Y as 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. h anation 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. KCC Office Use ONLY Signature: **Letter of Confidentiality Attached** If Denied, Yes Date:___ Subscribed and sworn to before me this ... Wireline Log Received NOTARY PUBLIC - State of Kansas 19 2000. PAMELA PRICE **Geologist Report Received** My Appt. Exp. 2-27-01 **UIC Distribution**

Date Commission Expires: File.

perator Name: CI ec. 7 Twp. 34					se Name:_ nty:	HOFFMAN T		Well #:	2	
NSTRUCTIONS: Sho ested, time tool open emperature, fluid reco dectric Wireline Logs	ow important tops a and closed, flowing overy, and flow rate	and base of g and shut- es if gas to s	formations in pressures surface test,	penetrated, whether along with	d. Detail al	I cores. Repo	rt all final copies of	ostatic pressu	res, bottom	hole
Drill Stem Tests Taken (Attach Additional Sheets)			∑ Yes			og Formation (Top), Depth and		and Datum	Datum S	
amples Sent to Geok	∑ Yes ☐ No			Nam	e		Тор		Datum	
Cores Taken Electric Log Run (Submit Copy)		Yes No								
Higi	ctral Dens h Resoluti ent Bond									
		Report		RECOR	_		-1:1-			
Purpose of String	Size Hole	Size	Casing	V	Veight	rmediate, produ	Type of	# Sacjs	Type and Percent	
Conductor	Drilled	Set (In O.D.)		L	s. / Ft.	Depth	Cement	Used	Additives	
Surface	12-1/4"	8-5/8"		24#		635'	lite Class A	225	3%cc 2%ge1, 3%cc	
Production	7-7/8"	4-1/2"		10.5#		5560'	Premium	140	10%salt,5%Ka	
			ADDITIONAL	L CEMEN	TING / SQU	EEZE RECOR	D			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement		#Sac	ks 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				
6 SPF	5298-5302					900 Bb1s. H 0 300 Sx.sand				
6 SPF	5342-48					170 T CO ₂				
6SPF	5324-27	7								
	Size Set At Packer At 2 3/8 5262 NA					Liner Run				
WOPI	L		Producing Me	thod	X Flowing	Pump	ing Gas Lif	t 🗍 Oth	er (Explain)	
stimated Production Per 24 Hours	Oil I	Bbis.	Gas 300	Mcf	Wate 30	E	Bbls. G	ias-Oil Ratio		Gravity
Sposition of Gas Vented Sold (If vented, Sumi	METHOD OF Co	OMPLETION	OpenHole Other (Spec	X Pe		Repoduction Inte	Commingled			