

30167

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**

**P&A**

**KBW O & G**  
**KCC WICHITA**  
**COPY**

Operator: License # 5316  
Name: FALCON EXPLORATION, INC.

**CONFIDENTIAL**

API No. 15 - 033-21318-0000  
County: COMANCHE

Address: 155 N. MARKET, SUITE 1020  
City/State/Zip: WICHITA, KS 67202

SW .SW Sec. 5 Twp. 34 S. R. 18  East  West

Purchaser: \_\_\_\_\_  
Operator Contact Person: MICHEAL S. MITCHELL

**Release**  
**AUG 18 2003**

455 feet from  N (circle one) Line of Section  
330 feet from E  (circle one) Line of Section

Phone: (316) 262-1378  
Contractor: Name: VAL ENERGY, INC.

**KCC**  
**From Confidential**  
**AUG 07 2002**

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW  SW  
Lease Name: HOFFMAN TRUST Well #: 1

License: 5822  
Wellsite Geologist: TIMOTHY PIERCE

**CONFIDENTIAL**

Field Name: BUTTERMILK NE  
Producing Formation: \_\_\_\_\_

Designate Type of Completion:  
 New Well  Re-Entry  Workover

Elevation: Ground: 1870 Kelly Bushing: 1880  
Total Depth: 6261 Plug Back Total Depth: \_\_\_\_\_

Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW

Amount of Surface Pipe Set and Cemented at 838 KB Feet  
Multiple Stage Cementing Collar Used?  Yes  No

Dry  Other (Core, WSW, Expl., Cathodic, etc)  
If Workover/Re-entry: Old Well Info as follows:

If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from \_\_\_\_\_

Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Enhr./SWD

**Drilling Fluid Management Plan**  
*(Data must be collected from the Reserve Pit)*

*P.A. WB-18-03*

Plug Back  Plug Back Total Depth  
 Commingled Docket No. \_\_\_\_\_

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_

Dual Completion Docket No. \_\_\_\_\_  
 Other (SWD or Enhr.?) Docket No. \_\_\_\_\_

Location of fluid disposal if hauled offsite:  
Operator Name: KBW OIL & GAS

5/22/02 6/5/02 6/5/02  
Spud Date or Date Reached TD Completion Date or Recompletion Date

Lease Name: HARMON SWD License No.: 5993  
Quarter \_\_\_\_\_ Sec. 11 Twp. 33 S. R. 20  East  West  
County: COMANCHE Docket No.: D98329

**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: [Signature]

Title: PRESIDENT Date: 8/6/02

Subscribed and sworn to before me this 6TH day of AUGUST, 2002

19 \_\_\_\_\_  
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

0967

Operator Name: FALCON EXPLORATION, INC. Lease Name: HOFFMAN TRUST Well #: 1  
Sec. 5 Twp. 34 S. R. 18  East  West County: COMANCHE

**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 ENCLOSED GEOLOGIST'S REPORT

| CASING RECORD <input checked="" type="checkbox"/> New <input 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 |
| CONDUCTOR   | 30"               | 20"                       |                   | 149           | CLASS A        | 200         | 3%CC + 2%GEL               |
| SURFACE   | 12 1/4"           | 8 5/8"                    | 24#               | 838 KB        | 65/35          | 325         | 6 + 3%GEL                  |
|   |                   |                           |                   |               | CLASS A        | 100         | 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  | Acid, Fracture, Shot, Cement Squeeze Record | Depth |
|----------------|---|---|-------|
|                | Specify Footage of Each Interval Perforated | (Amount and Kind of Material Used)          |       |
|                |   |   |       |
|                |   |   |       |
|                |   |   |       |
|                |   |   |       |
|                |   |   |       |

| TUBING RECORD                                    |           | Size    | Set At   | Packer At     | Liner Run  |
|--|-----------|---------|--|---------------|--|
|  |           |         |  |               | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr. |           |         | Producing Method   |               |  |
|  |           |         | <input 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  |

Disposition of Gas      **METHOD OF COMPLETION**      Production Interval

Vented    Sold    Used on Lease    Open Hole    Perf.    Dually Comp.    Commingled  
 (If vented, Sumit ACO-18.)    Other (Specify)