SIDE ONE

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

Operator: License # 3795

Name: THE SOUTH FORTY INC

Address RT 1 BOX 118

City/State/Zip LAVERNE OK 73848

Purchaser: N/A

Operator Contact Person: SHARON MILLER

Phone (405) 921-3366

Contractor: Name: SPEEDWAY WELL SERVICE INC

License: 03760

Wellsite Geologist:

Designate Type of Completion
____ New Well ____ Re-Entry __X__ Workover

____ Oil __X__ SWD ____ Temp. Abd.
____ Gas ____ Inj ____ Delayed Comp.
____ Dry ____ Other (Core, Water Supply, etc.)

If OWWO: old well info as follows:
Operator: The Headinger Company

Well Name: Thornhoff 1-32

Comp. Date 2-13-74 Old Total Depth 6248

Drilling Method:
____ Mud Rotary ____ Air Rotary __X__ Cable

6-2-92 Spud Date | Date Reached TD | 06-10-92 Completion Date

API NO. 15- 119-20212 0001

County MEADE

C S/2 SE Sec. 32 Twp. 34S Rge. 27 ____ East __X__ West

70 Ft. North from Southeast Corner of Section

1250 Ft. West from Southeast Corner of Section
(NOTE: Locate well in section plat below.)

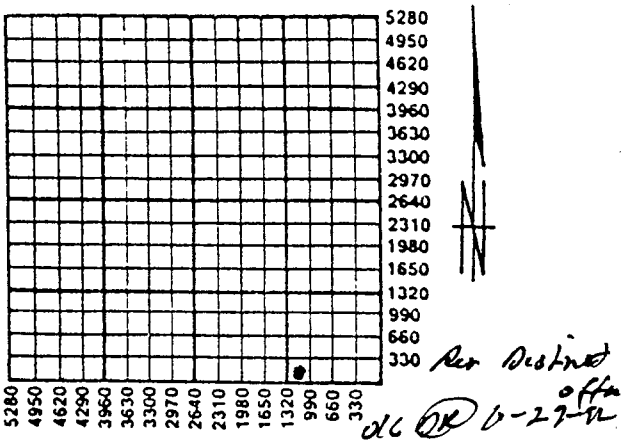
Lease Name THORNHOFF Well # 1-32

Field Name FINCHAM

Producing Formation MORROW

Elevation: Ground 2333 KB 2342

Total Depth 6248 PBTD




Rec Destined
dlc OK 6-29-92

Amount of Surface Pipe Set and Cemented at 805 Feet

Multiple Stage Cementing Collar Used? ____ Yes __X__ No

If yes, show depth set ____ Feet

If Alternate II completion, cement circulated from ____

feet depth to ____ w/ ____ sx cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 Allen Barley

Title President Date 7-24-92

Subscribed and sworn to before me this 24 day of July, 1992.

Notary Public

Date Commission Expires

RECEIVED
STATE CORPORATION COMMISSION
JUL 27 1992

K.C.C. OFFICE USE ONLY
F ____ Letter of Confidentiality Attached
C ____ Wireline Log Received
C ____ Drillers Timelog Received

Distribution
____ KCC ____ SWD/Rep ____ NGPA
____ KGS ____ Plug __✓__ Other (Specify) F

Form ACO-1 (7-89)

SIDE TWO

Operator Name THE SOUTH FORTY INC  Lease Name THORNHOFF  Well # 1-32

Sec. 32 Twp. 34S Rge. 27  ☐ East ☒ West  County MEADE

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

| | | |
|---|---|---|
| Drill Stem Tests Taken (Attach Additional Sheets.) | ☐ Yes | ☒ No |
| Samples Sent to Geological Survey | ☐ Yes | ☒ No |
| Cores Taken | ☐ Yes | ☒ No |
| Electric Log Run (Submit Copy.) | ☒ Yes | ☐ No |

**Formation Description**

☐ Log ☐ Sample

Name MORROW  Top 5974  Bottom 6006

**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 | # Sacks Used | Type and Percent Additives |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

| Shots Per Foot | PERFORATION RECORD Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth |
|---|---|---|---|
| 4SPF | 6002-6006 | 450 BSW | 5974 |
| 4SPF | 5974-5988 | #2000 Sand | 6006 |

| TUBING RECORD | Size | Set At | Packer At | Liner Run |
|---|---|---|---|---|
| | 2 3/8 | 5307.45 | 5307.45 | ☐ Yes ☒ No |

Date of First Production  Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☒ Other (Explain) SWD

| Estimated Production Per 24 Hours | Oil Bbls. | Gas Mcf | Water Bbls. | Gas-Oil Ratio | Gravity |
|---|---|---|---|---|---|
| | | | X | | |

Disposition of Gas: NONE

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

METHOD OF COMPLETION

☐ Open Hole ☒ Perforation ☐ Dually Completed ☐ Commingled

☐ Other (Specify) SALT WATER DISPOSAL

Production Interval