

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

operator: License # 09228

Name: Marlin Oil Corporation

Address 2300 Liberty Tower

100 N. Broadway

City/State/Zip Okla. City, OK 73102

Purchaser: Texaco Trading & Transp.

Operator Contact Person: W. R. Lynn

Phone (405) 232-3267

Contractor: Name: \_\_\_\_\_

License: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion

☐ New Well ☐ Re-Entry ☒ Workover

☒ Oil ☐ SWD ☐ SIOW ☐ Temp. Abd.

☐ Gas ☐ ENHR ☐ SIGW

☐ Dry ☐ Other (Carb. WSW, Expl., Cathodic, etc)

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

Operator: Donald C. Slawson

Well Name: Grant #2-2

Comp. Date 6-18-87 Old Total Depth 6700'

☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD

☐ Plug Back ☐ PSTD

☐ Cemented ☐ Docket No. \_\_\_\_\_

☐ Dual Completion ☐ Docket No. \_\_\_\_\_

☐ Other (SWD or Inj?) Docket No. \_\_\_\_\_

2-10-87 3-21-87 6-18-87

Spud Date 2-10-87 Date Reached TD 3-21-87 Completion Date 6-18-87

API NO. 15- 189-21000-000 **COPY**

County Stevens

NE NW Sec. 2 Twp. 35S Rge. 35 2 U

660 Feet from (NW) (circle one) Line of Section

1980 Feet from (NW) (circle one) Line of Section

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

Lease Name Grant Well # 2

Field Name \_\_\_\_\_

Producing Formation Basal Chester

Elevation: Ground 2970 KB 2976

Total Depth 6700 PSTD 6654

Amount of Surface Pipe Set and Cemented at 1721 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 cat.

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

Workover

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

Downstring 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 W. R. Lynn

Title Agent Date 1-10-94

scribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_

Notary Public \_\_\_\_\_

Date Commission Expires \_\_\_\_\_

|                                         |                                    |                 |
|-----------------------------------------|------------------------------------|-----------------|
| K.C.C. OFFICE USE ONLY                  |                                    | RECEIVED        |
| F                                       | Letter of Confidentiality Attached | JAN 14 1994     |
| C                                       | Wireline Log Received              |                 |
| C                                       | Geologist Report Received          |                 |
| Distribution                            |                                    |                 |
| <input checked="" type="checkbox"/> KCC | <input type="checkbox"/> SWD/Rep   | Other (Specify) |
| <input checked="" type="checkbox"/> KGS | <input type="checkbox"/> Plug      |                 |

W 28-22-2

SIDE TUB

Operator Name Marlin Oil CorporationLessee Name GrantWell # 2Sec. 2 Twp. 35 Rge. 35☐ EastCounty Stevens☒ West

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests during interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static or 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 ☒ NoElectric Log Run  
(Submit Copy.)☐ Yes ☒ No

List All E.Logs Run:

☐ Log

Formation (Top), Depth and Datum

☐ Sample

Name

Top

Datum

## 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 |
|-------------------|-------------------|---------------------------|-----------------|---------------|----------------|--------------|----------------------------|
| Surface           | 11.0              | 8.625                     | 24              | 1721          | "C"            | 550          | .                          |
| Production        | 7.875             | 4.500                     | 10.5            | 6697          | "H"            | 425          |                            |
|                   |                   |                           |                 |               |                |              |                            |

## 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|-------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|-------|
| 2              | 6548-6553'                                                                                | 1000 gal acid                                                                     |       |
|                |                                                                                           |                                                                                   |       |
|                |                                                                                           |                                                                                   |       |
|                |                                                                                           |                                                                                   |       |

| TUBING RECORD                                  | Size                                                                                                                                                                     | Set At     | Packer At     | Liner Run          | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
|------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|---------------|--------------------|---------------------------------------------------------------------|
|                                                | 2.375                                                                                                                                                                    | 6495'      | None          |                    |                                                                     |
| Date of First, Resumed Production, SMD or Inj. | Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) |            |               |                    |                                                                     |
| 11-12-93                                       |                                                                                                                                                                          |            |               |                    |                                                                     |
| Estimated Production Per 24 Hours              | Oil 38 Bbls.                                                                                                                                                             | Gas 73 Mcf | Water 0 Bbls. | Gas-Oil Ratio 1921 | Grav 38.1                                                           |

Disposition of Gas:

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

METHOD OF COMPLETION

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify) \_\_\_\_\_

Production Interval

6510-6553'