

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

Operator: License # 6931

Name: Bowman Oil Company

Address 101 Petroleum

City/State/Zip Codell, KS 67630

Purchaser: _____

Operator Contact Person: Don Bowman

Phone (913) 434-2304

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Micheal Davignon

Designate Type of Completion

_____ New Well X Re-Entry _____ Workover

_____ Oil _____ SWD _____ SLOW _____ Temp. Abd.

_____ Gas _____ ENHR _____ SIGW

_____ Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: Viking Resources

Well Name: #1 Shaw 'A'

Comp. Date 8/14/88 Old Total Depth 4090

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

_____ Plug Back _____ PSTD

_____ Commingled _____ Docket No. _____

_____ Dual Completion _____ Docket No. _____

_____ Other (SWD or Inj?) Docket No. _____

9/26/91 9/28/91

Spud Date 9/26/91 Date Reached TD 9/28/91 Completion Date 9/28/91

API NO. 15- 179-20,929-A 33-8-28-0

County Sheridan

SE _____ SW _____ NE _____ Sec. 33 Twp. 8S Rge. 28 X W

2970 ✓ Feet from S/N (circle one) Line of Section

1815 ✓ Feet from E/W (circle one) Line of Section

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

Lease Name Schamberger ✓ Well # 1 "OWWO"

Field Name _____

Producing Formation Topeka

Elevation: Ground 2711' KB 2716'

Total Depth 4051 PSTD _____

Amount of Surface Pipe Set and Cemented at 257' / Prev. Set _____ Feet

Multiple Stage Cementing Collar Used? Y Yes _____ No

If yes, show depth set Anhydrite 2380' Feet

If Alternate II completion, cement circulated from surface

Will be completed within 90 days
feet depth to 2380 w/ _____ sx cnt.

Drilling Fluid Management Plan 5-4-83
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering method used Allowed to dry

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 Vesta J. Russell

Title Partner Date 10/10/91

Subscribed and sworn to before me this 10th day of October, 19 91.

Notary Public Vesta J. Russell

Date Commission Expires 7-17-92 Vesta J. Russell

NOTARY PUBLIC - State of Kansas
VESTA J. RUSSELL
My Appt. Exp. 7-17-92

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received

Distribution
KCC _____ SWD/Rep _____ NGPA _____
KGS _____ Plug _____ Other IS
(Specify)

OCT 11 1991

Form ACO-1 (7-91)

57620

SIDE TWO

Operator Name Bowman Oil CompanyLease Name SchambergerWell # 1 "OWWO"Sec. 33 Twp. 8S Rge. 28☐ EastCounty Sheridan☒ West

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 ☒ NoElectric Log Run
(Submit Copy.)☐ Yes ☒ No

List All E.Logs Run:

☒ Log

Formation (Top), Depth and Datum

☐ Sample

Name

Top

Datum

Topeka

3594

Heebner

3805

K.C.

3846

Base K.C.

4079

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
Production	7 7/8	4 1/2	10/5	4051	60-40	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
2	3974 - 3978	250 mud acid	
	Bridge plug set at 3950		
2	3746-48	250 mud acid	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	3925			
Date of First, Resumed Production, SWD or Inj.	10/10/91	Producing Method	<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 10 Bbls. <input checked="" type="checkbox"/> Gas Mcf Water X Bbls. 20	Gas-Oil Ratio	Gravity		

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

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

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