

2132

30-9-18W RECEIVED *md*

COPY SIDE ONE

JAN 28 1991

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

API NO. 15- 163-23,136

County Rooks

SW NE SE Sec. 30 Twp. 9S Rge. 18 East West

1650 Ft. North from Southeast Corner of Section

990 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name Stucky 'A' Well # 2

Field Name _____

Producing Formation Arbuckle

Elevation: Ground 2183' KB 2188'

Total Depth 3690' PBTD _____

Operator: License # 3386

Name: Leavell Resources Corporation

Address 1932-E Hwy 40 P.O. Box 308

City/State/Zip Hays, KS 67601

Purchaser: FARMLAND INDUSTRIES

Operator Contact Person: Russ Leavell

Phone (913) -628-3324

Contractor: Name: Emphasis Oil Operations

License: 8241

Wellsite Geologist: Ron Nelson

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp. Abandoned

Gas Inj Delayed Comp.

Dry Other (Core, Water Supply, etc.)

If OWMO: old well info as follows:

Operator: _____

Well Name: _____

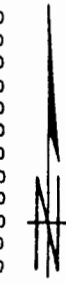
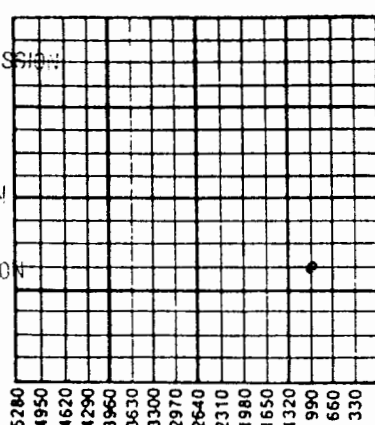
Comp. Date _____ Old Total Depth _____

Drilling Method:

Mud Rotary Air Rotary Cable

Spud Date 7/91 Date Reached TD 1/23/91 Completion Date 2/13/91

Well depth to surface w/ 300 265 sx cmt.



5-16-91

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 82-3-106 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 Brian Karlin

Title Production Vice President Date 4-5-91

Subscribed and sworn to before me this 5 day of April, 19 91.

Notary Public Betty Wilder

Date Commission Expires April 19, 1994

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) IS



COPY
SIDE TWO

30-9-180

Operator Name Leavell Resources Corporation Lease Name Stucky 'A' Well # 2
 Sec. 30 Twp. 9S Rge. 12 East West
 County Rooks

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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run (Submit Copy.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<p style="text-align: center;">Formation Description</p> <input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: center;">Top</th> <th style="text-align: center;">Bottom</th> </tr> </thead> <tbody> <tr> <td>Log-Tech</td> <td style="text-align: center;">3000</td> <td style="text-align: center;">3691</td> </tr> <tr> <td>Anhydrite</td> <td style="text-align: center;">1560+628</td> <td></td> </tr> <tr> <td>Topeka LM</td> <td style="text-align: center;">3116-928</td> <td></td> </tr> <tr> <td>Heebner SH</td> <td style="text-align: center;">3324-1136</td> <td></td> </tr> <tr> <td>Lans/KC</td> <td style="text-align: center;">3367-1179</td> <td></td> </tr> <tr> <td>Arbuckle</td> <td style="text-align: center;">3607-1419</td> <td></td> </tr> <tr> <td>L.T.D.</td> <td style="text-align: center;">3691-1503</td> <td></td> </tr> </tbody> </table>	Name	Top	Bottom	Log-Tech	3000	3691	Anhydrite	1560+628		Topeka LM	3116-928		Heebner SH	3324-1136		Lans/KC	3367-1179		Arbuckle	3607-1419		L.T.D.	3691-1503	
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CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacks Used	Type and Percent Additives
	12 1/4	8 5/8	20#	221	60-40 poz	135	3% cc, 2% gel
Production	7 7/8	5 1/2	14#	3686	60-40 poz	175	2%cc

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record	
Shots Per Foot	Specify Footage of Each Interval Perforated	(Amount and Kind of Material Used)	Depth
2	3630-32	500 gal - squeezed	
4	3618-22	500 gal - then squeezed	
4	3611-13	1500 gal 15% NE	
2	3625-31	500 gal 15% NE	
2	3443-46	1000 gal 15% NE	
2	3407-12	1000 gal 15% NE	
2	3271-75	1000 gal 15% NE	

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		2 7/8	3625	None		
Date of First Production	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)					
2/20/91						
Estimated Production Per 24 Hours	Oil	Bbls.	Gas	Mcf	Water	Bbls. Gas-Oil Ratio Gravity
	21				275	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.)

METHOD OF COMPLETION

Open Hole Perforation Dually Completed Commingled

Other (Specify) _____

Production Interval _____

