

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License #6861.....
Name Ron's Oil Operations, Inc
Address Rt. 1 Box 194
City/State/Zip Penokee, Ks 67659

Purchaser.....N/A.....

Operator Contact Person Ronald Nickelson
Phone913-674-2409.....

Contractor: License #4083.....
Name Western Kansas Drilling Inc

Wellsite Geologist Thomas M. Williams
Phone.....316-262-5061.....

Designate Type of Completion

☒ New Well ☐ Re-Entry ☐ Workover
☐ Oil ☐ SWD ☐ Temp Abd
☐ Gas ☐ Inj ☐ Delayed Comp.
☒ Dry ☐ Other (Core, Water Supply etc.)

If OWWO: old well info as follows:

Operator
Well Name
Comp. DateOld Total Depth.....

WELL HISTORY

Drilling Method:

☒ Mud Rotary ☐ Air Rotary ☐ Cable

9-27-87.....10-1-87.....10-1-87.....
Spud Date Date Reached TD Completion Date
4010.....
Total Depth PBTD

Amount of Surface Pipe Set and Cemented at 264 feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set.....feet
If alternate 2 completion, cement circulated
from 261.....feet depth to surface/165.SX cmt

API NO. 15-.....065-22,396.....

County.....Graham.....

.....N.....E.....4.....Sec.....13.....Twp.....9.....Rge.....24.....
☐ East ☒ West

.....3640.....Ft North from Southeast Corner of Section
.....1820.....Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

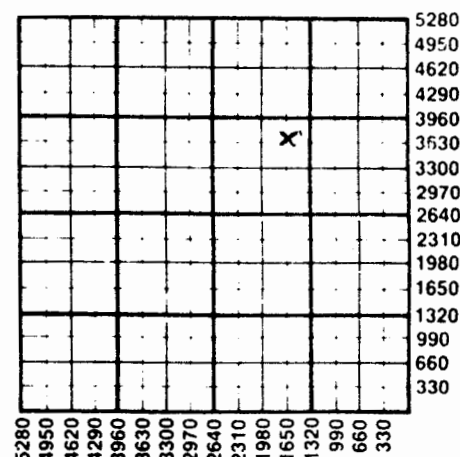
Lease Name.....Nickelson.....Well #.....13-2.....

Field Name.....Holly SE.....

Producing Formation.....N/A.....

Elevation: Ground.....2407.....KB.....2412.....

Section Plat



WATER SUPPLY INFORMATION

Disposition of Produced Water: ☐ Disposal
Docket # ☐ Repressuring

Questions on this portion of the ACO-1 call:

Water Resources Board (913) 296-3717

Source of Water:

Division of Water Resources Permit #.....

☐ Groundwater.....Ft North from Southeast Corner
(Well)Ft West from Southeast Corner of
Sec Twp Rge ☐ East ☐ West

☐ Surface Water.....Ft North from Southeast Corner
(Stream, pond etc).....Ft West from Southeast Corner
Sec Twp Rge ☐ East ☐ West

☒ Other (explain).....Pond.....
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.

Operator Name Ron's Oil Operations, Inc. Lease Name Nickelson Well # 13-2

Sec. 13 Twp. 9S Rge. 24 ☐ East ☒ West County Graham

WELL LOG

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 ☒ Yes ☐ No
Samples Sent to Geological Survey ☐ Yes ☒ No
Cores Taken ☐ Yes ☒ No

Formation Description
☒ Log ☐ Sample

DST 1: 3779-3801 30-27-30-30 ISIP 1958
FSIP 1941 Rec: 15' mud
DST 2: 3834-3850 30-30-30-30 ISIP 2036
FSIP 1984 Rec: 40' WC mud
DST 3: 3940-3966 30-30-30-27 ISIP 2093
FSIP 2068 Rec: 10' mud with spots oil.

Name	Top	Bottom
Topeka	3502	
Heebner	3722	
Toronto	3745	
Lansing/KC	3761	
Base KC	3987	

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		8 5/8		261	60/40	165	2% gel, 3% cc.

PERFORATION RECORD

Shots Per Foot	Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
	N/A		

TUBING RECORD Size Set At Packer at Liner Run ☐ Yes ☐ No

Date of First Production N/A Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (explain).....