

3508
COPY
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 # 5184

Name: Shields Oil Producers, Inc.

Address Shields Bldg.

City/State/Zip Russell, KS 67665

Purchaser: None

Operator Contact Person: M. L. Ratts

Phone (913) 483-3141

Contractor: Name: Shields Drlg., Co., Inc.

License: 5655 STATE CORPORATION COMMISSION

Wellsite Geologist: Gerald Honas

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SMD Temp. Abd.
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply, etc.)

If OWD: old well info as follows:
Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Drilling Method:
 Mud Rotary Air Rotary Cable
Spud Date 5-30-91 Date Reached TD 6-6-91 Completion Date _____

API NO. 15- 065-22,614

County Graham

SE NE NW Sec. 33 Twp. 9 Rge. 25 East West

1650 Ft. North from Southeast Corner of Section

2970 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

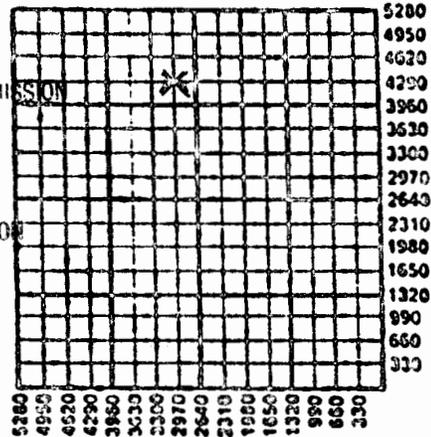
Lease Name Pfeifer Well # 1

Field Name Bollig

Producing Formation None

Elevation: Ground 2558 KB 2563

Total Depth 4094 PBD _____



5200
4950
4620
4290
3960
3630
3300
2970
2640
2310
1980
1650
1320
990
660
330

AITD D x A

RECEIVED
JUN 20 1991

CONSERVATION DIVISION
Wichita, Kansas

Amount of Surface Pipe Set and Cemented at 218 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/ _____ sq 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 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 M. L. Ratts

Title Production Dept Date 6-14-91

Subscribed and sworn to before me this 14th day of June, 1991.

Notary Public Ruth Phillips

Date Commission Expires _____

RUTH PHILLIPS
State of Kansas
My Appt. Exp. 5-24-95

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received
Distribution
 KCC SMD/Rep NGPA
 KGS Plug Other (Specify) _____

68652

SIDE TWO

Operator Name Shields Oil Producers, Inc. Lease Name Pfeifer Well # 1
 Sec. 33 Twp. 9 Rge. 25 East County Graham
 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 Yes No
 (Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
 (Submit Copy.)

D.S.T. #1 3886-3963 Times: 30-30-30-45
 Req. 310' Muddy Wtr
 I.H.P.-2022 F.S.I.P.- 255
 I.F.P. - 60-122 F.H.P. - 2011
 I.S.I.P. - 266
 F.F.P. - 166-188

Name	Formation Description	
	Top	Bottom
Anhydrite	2205	2243
Topeka	3597	3814
Heebner	3814	3817
Toronto	3835	3855
L-KC	3855	4086

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	12 1/4	8 5/8	20	218	Quickset	160	

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

TUBING RECORD Size Set At Packer At Liner Run Yes No

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

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

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 _____