KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM

CONFIDENTIAL

WELL HISTORY - DESCRIPTION OF WELL & LEASE

RECEIVED
APR 01 2005
KCC WICHITA

Operator: License # 5135
Name: JOHN O. FARMER, INC.
Address: P.O. Box 352
City/State/Zip: Russell, KS 67665
Purchaser: None
Operator Contact Person: John O. Farmer, IV
Phone: (785) 483-3144
Contractor: Name: Discovery Drilling Co., Inc.
License: 31548
Wellsite Geologist: Matt Dreiling

KCC
MAR 30 2005
CONFIDENTIAL

Designate Type of Completion:

X New Well ___ Re-Entry ___ Workover
___ Oil ___ SWD ___ SIOW ___ Temp. Abd.
___ Gas ___ ENHR ___ SIGW
X Dry ___ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: ___
Well Name: ___
Original Comp. Date: ___ Original Total Depth: ___

___ Deepening ___ Re-perf. ___ Conv. to Enhr./SWD
___ Plug Back ___ Plug Back Total Depth
___ Commingled Docket No. ___
___ Dual Completion Docket No. ___
___ Other (SWD or Enhr.?) Docket No. ___

3/7/05	3/12/05	3/13/05
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25,400-00-00
County: Ellis
230'N&150'E of - NE- NW- NW Sec. 34 Twp. 12 S. R. 17W ☐ East X West
100 feet from ● / (N) (circle one) Line of Section
1140 feet from ● / (W) (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Schmidt-Schmeidler Well #: 1
Field Name: Schmeidler SE
Producing Formation: None
Elevation: Ground: 2093' Kelly Bushing: 2101'
Total Depth: 3680' Plug Back Total Depth: ___
Amount of Surface Pipe Set and Cemented at 220.86 Feet
Multiple Stage Cementing Collar Used? ☐ Yes X No
If yes, show depth set ___ Feet
If Alternate II completion, cement circulated from ___
feet depth to ___ w/ ___ sx cmt.
(10sks In Mouse Hole)(15sks In Rat Hole)

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

Chloride content 13,000 ppm Fluid volume 300 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite:
Operator Name: ___
Lease Name: ___ License No.: ___
Quarter ___ Sec. ___ Twp. ___ S. R. ___ ☐ East ☐ West
County: ___ Docket No.: ___

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: John O. Farmer IV
Title: Vice-President Date: 3-30-05

Subscribed and sworn to before me this 30th day of March, 2005

Notary Public: Margaret A. Schulte
Margaret A. Schulte
Date Commission Expires: 1-27-09

NOTARY PUBLIC - State of Kansas
MARGARET A. SCHULTE
My Appt. Exp. 1-27-09

KCC Office Use ONLY

YES Letter of Confidentiality Attached
If Denied, Yes ☐ Date: ___
___ Wireline Log Received
___ Geologist Report Received
___ UIC Distribution

X