FORM MUST BE TYPED

CONFIDENTIAL

SIDE ONE

ORIGINAL

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

API NO. 15- _15-193-20,640000|_

County _____ Thomas _____

NE . NW. ___ - Sec. 11 Twp. 6S Rge. 33W . ___ W

Operator: License # _4767_

Name: _Ritchie Exploration, Inc._

Address _125 N. Market, Suite 1000_

990 _____ Feet from S/N (circle one) Line of Section

2310 _____ Feet from E/W (circle one) Line of Section

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

City/State/Zip _Wichita,KS 67202_

Lease Name _E. Shughart_ Well # _1_

Purchaser: _Koch Oil_

Field Name _____

Operator Contact Person: _Lisa Thimmesch_

Producing Formation _Pawnee, L/KC_

Phone (_316_) _267-4375_

Elevation: Ground _3101_ KB _3106_

Contractor: Name: _____

Total Depth _4654_ PBTD _4430'_

License: _____

Amount of Surface Pipe Set and Cemented at _____ Feet

Wellsite Geologist: _None_

Multiple Stage Cementing Collar Used? _____ Yes _____ No

If yes, show depth set _____ Feet

Designate Type of Completion

_____ New Well _____ Re-Entry _X_ Workover

If Alternate II completion, cement circulated from _____

_X_ Oil _____ SWD _____ SIOW _____ Temp. Abd.

feet depth to _____ w/ _____ sx cmt.

_____ Gas _____ ENHR _____ SIGW

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

Drilling Fluid Management Plan **REWORK JH 9-30-96**
(Data must be collected from the Reserve Pit)

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

Operator: _Ritchie Exploration, Inc._

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _#1 E. Shughart_

Dewatering method used _____

Comp. Date _1-11-96_ Old Total Depth _4654_

Location of fluid disposal if hauled offsite:

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

Operator _____

_X_ Plug Back _____ PBTD

_X_ Commingled Docket No. _____

RECEIVED
STATE CORPORATION COMMISSION

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INFORMATION
CONFIDENTIAL

SEP 06 1996

9-6-1996

RELEASED

_____ Dual Completion Docket No. _____

Lease Name _____ License No. _____

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

_____ Quarter Sec. **OCT 6 1998** S Rng. _____ E/W

7-22-96 _____ 7-24-96

County _10-6-98_ Docket No.

Spud Date / Date Reached TD / Completion Date

FROM CONFIDENTIAL

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 _____

Title _President_ Date _9-5-96_

Subscribed and sworn to before me this _5th_ day of _September_
19 _96_.

Notary Public _Lisa Thimmesch_

Date Commission Expires _____

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
(Specify)

Form ACO-1 (7-91)

Operator Name __Ritchie Exploration, Inc.__ Lease Name __E. Shughart__ Well # __1__

Sec. __11__ Twp. __6S__ Rge. __33W__ ☐ East ☒ West County __Thomas__

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 ☒ No

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

List All E.Logs Run:

☐ Log   Formation (Top), Depth and Datums   ☐ Sample

Name	Top	Datum

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

PLEASE KEEP THIS INFORMATION CONFIDENTIAL

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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
3	4149'-4155' L/KC (New)	1000 gal 15% NE	L/KC
3	4351'-4355' Pawnee (old)		
	CIBP at 4430'		

TUBING RECORD	Size 2 7/8"	Set At 4407	Packer At	Liner Run ☐ Yes ☒ No

Date of First, Resumed Production, SWD or Inj.: 7-24-96

Producing Method: ☐ Flowing ☒ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls. 145	Gas Mcf 0	Water Bbls. 0	Gas-Oil Ratio	Gravity

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

METHOD OF COMPLETION: ☐ Open Hole ☒ Perf. ☐ Dually Comp. ☒ Commingled ☐ Other (Specify) _____

Production Interval __4149'-4355' O.A.__