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API NO. 15- 163-22,961-00-0 STATE CORPORATION COMMISSION OF KANSAS OIL & GAS CONSERVATION DIVISION FROM CONFIDENTIAL county _ Rooks RECOMPLETION FORM ACO-2 AMENDMENT TO WELL HISTORY NW sec. 6 Twp. 7S Rge. 20 4290 Ft. North from Southeast Corner of Section Operator: License # ____4767 4290 Name: Ritchie Exploration, Inc. Ft. West from Southeast Corner of Section (NOTE: Locate well in section plat below.) Address: 125 N. Market, Suite 1000 _____ Well # 2 Waller Lease Name ___ City/State/Zip: Wichita, KS 67202 Field Name _ Solo Bow SE Purchaser: Koch Oil Company Producing Formation Toronto & L/KC Elevation: Ground 2213 KB 2218 Operator Contact Person: Phone: (316) 267-4375 Designate Type of Original Completion 4950 X New Well ____ Re-Entry __ Workover 4290 Date of Original Completion 12/12/873960 3630 Name of Original Operator Ritchie Exploration, Inc 3300 2970 Waller #2 Original Well Name 2640 2310 Date of Recompletion: 1980 1650 1320 990 660 Re-entry Workover 330 Designate Type of Recompletion/Workover: _____ SWD _____Temp. Abd. oil _ Delayed Comp. 🕃 Inj Gas K.C.C. OFFICE USE ONLY Other (Core, Water Supply, etc?) Letter of Confidentiality Attached Wireline Log Received Deepening X Re-perforation Drillers Timelog Received __ Plug Back _ Conversion to Injection/Disposal Distribution __ SWD/Rep NGPA Is recompleted production: Plua Other X Commingled (Specify) Docket No. Dual Completion Docket No. Other (Disposal or Injection?) Docket No. 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 recompletion of any well. Rules 82-3-107 and 82-3-141 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 or ACO-5 Submit prior to or with this form for approval of commingling or dual completions. Submit CP-1 with all plugged wells. CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection <u>must</u> receive approval before use; submit form U-1. rules and regulations promulgated to regulate the oil and gas industry have been fully complied All requirements of the statutes/ with and the statements herein and correct to the best of my knowledge. title Presi dent ______Date 2/18/91 Signature x __ day of _February Subscribed and sworn to before me this Date Commission Expires 9/20/94Notary Public 🏒 DANNA McKAIG · NOTARY PUBLIC

STATE OF KANSAS My Appl. Exp. 9120199

SIDE THO

		amakian T	SIDE ING	Waller	Well #2	
rator Name Ri			<u>1C</u> . Lease Name		WCLL IT	
. <u>6</u> Twp. <u>7S</u>	Rge. <u>20</u> X		County Roc	oks		
		West	county			
		RECOMPLETI	ION FORMATION DESC	RIPTION		
			Log Samp	le		
<u>Name</u>		٠		<u>Top</u>	<u>Bottom</u>	
Toronto				3435'	3446'	
				FCODD		
		ADDITIONAL C	EMENTING/SQUEEZE R	ECOKD		
rpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Ту	pe and Percent Additives	
_ Perforate _ Protect Casing						
Plug Back TD Plug Off Zone						
•						
				Acid Fra	cture, Shot, Cement Squee	ze Record
Shots Per Foot	Specify Footage	of Each Interval	Perforated	(Amou	nt and Kind of Material L	lsed)
3	3436 ¹ -38 ¹ ·			750 gals 15% NE		
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3TD	P	rtug Type	TUBING RECORD			
2 3/8"	Set At	37261			Was Liner Run	Y
ate of Resumed Pro	duction Dienoeal	l or Injection	11/27/90			
ate of Resumed Pro stimated Production			Bbls. Water	10	Bbls0	as-Oil-Rati
Jennieum i i oddoe i o		Gas				