## CRICINAL

City/State/Zip: Great Bend, KS 67530

Operator Contact Person: Carmen Schmitt

Wellsite Geologist: Richard P. O'Donnell

ENHR \_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_ \_\_\_\_\_ Re-perf.

9-1-03

Date Reached TD

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

Contractor: Name: Pickrell Drilling Company, Inc. CC WICH

\_\_\_\_\_ Re-Entry \_\_\_\_ Workover

SWD \_\_\_\_\_SIOW \_\_\_\_Temp. Abd. \_\_ SIGW

\_ Other (Core, WSW, Expl., Cathodic, etc)

Docket No...

Docket No.\_\_\_

Docket No.\_

\_Conv. to Enhr./SWD

\_\_\_\_ Plug Back Total Depth

9-18-03

Completion Date or

Recompletion Date

Operator: License # 6569 Name: Carmen Schmitt Inc.

Address: P.O. Box 47

Purchaser: N.C.R.A.

License: 5123

\_\_\_\_ New Well ✓\_ Oil

Gas

\_ Dry

\_ Deepening \_\_ Plug Back\_\_\_

Commingled

\_\_ Dual Completion

\_\_ Other (SWD or Enhr.?)

Operator: Well Name: \_

8-19-03

Spud Date or

Recompletion Date

Phone: (620) 793 5100

Designate Type of Completion:

## KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form ACO-1 September 1999 Form Must Be Typed

## **WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE**

API No. 15 - 101-21816-0000
County: Lane
W/2 - NW Sec. 13 Twp. 16 S. R. 28W East West
1320' FNL feet from S / (N) (circle one) Line of Section
660' FWL feet from E / (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE (NW) SW
Lease Name: Bentley Well #: 1
Field Name: Unnamed
Producing Formation: Cherokee, Ft. Scott, Kansas City
Elevation: Ground: 2694 Kelly Bushing: 2699
Total Depth: 4585'
Amount of Surface Pipe Set and Cemented at 220 Fee
Multiple Stage Comenting Collan NSEQT ENTIAL Yes No
If yes, show depth set 2183
If Alternate II completion, cement circulated from 2183
feet depth to surface w/ 200 SMD sx cmt
M2112 2.011
Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Chloride content 3000 ppm Fluid volume 1500 bbls
Dewatering method used Evaporation
Location of fluid disposal if hauled offsite:
Operator Name:

Lease Name: License No.:

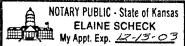
Quarter\_\_\_\_\_ Sec.\_\_\_\_ Twp.\_\_\_\_ S. R.\_\_\_\_ East West

\_\_\_\_ 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

Letter of Confidentiality Attached
n Denieu, Tes Date
Wireline Log Received
Geologist Report Received
UIC Distribution



Side Two



	Carmen Schmitt In		Lease Nar	ne: Bentley		_ Well #: 1			
Sec. 13 Twp.	S. R28W	East _ West	County: _L			vven #,	7,7,0		
temperature, fluid	recovery, and flow ra	s and base of formations ing and shut-in pressure tes if gas to surface test, n final geological well site	along with final	ail all cores. Repo pressure reached chart(s). Attach ex	rt all final copies of d static level, hydro ctra sheet if more s	of drill stems to estatic pressu space is need	ests giving interval ires, bottom hole led. Attach copy of a		
Drill Stem Tests Ta		☑ Yes ☐ No		∠ Log Forma	tion (Top), Depth a	and Datum	Sample		
Samples Sent to G	Geological Survey	Yes V No	1	lame		Тор	Datum		
Cores Taken		Yes No	A	nhydrite		2106	+ 593		
Electric Log Run (Submit Copy)		✓ Yes  No	Li	ansing		3931	-1232		
List All E. Logs Ru	n:		М	armaton		4271	-1572		
Dual Compe Dual Induction	ensated Porosit on, Sonic, Son	ty, Micreresistivity ic Cement Bond	i	ort Scott ississippian	The state of the s	4431 4531	-1732 -1832		
					<b>HHAR</b> 16	2006			
		CASING Report all strings set-	RECORD	New Used intermediate, prøder	tion patr oo a re-	arara ara	ň :		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of	# Sacjs	Type and Percent		
Surface	12.25"	8.625"	23	220'	70/30 Poz	Used 160	Additives		
Production	on 7.875" 5.5"		15.5	4574	Multi-density 200		2% gel,3%cc		
					maid defisity	200			
		ADDITIONAL	CEMENTING / S	QUEEZE RECORD					
Purpose:  Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives					
Shots Per Foot	Specify	ON RECORD - Bridge Plug Footage of Each Interval Peri	s Set/Type forated	Acid, Frac	ture, Shot, Cement S ount and Kind of Mate	queeze Record	i Depth		
2	4505-4515			500 gal 10%	acetic acid	,	4515		
2	4450-4455, 4432			1000 gal 15% MCA acid 4					
2	4144-4150, 4160	-4170		1000 gal 15%	6 MCA acid		4190		
		Set At 4521	Packer At	Liner Run	Yes 🗸 No				
9-18-03	d Production, SWD or En		od Flowin	g Pumping	Gas Lift	Other	(Explain)		
Estimated Production Per 24 Hours  Disposition of Gas	179.95	-0-	Mof Wat		s. Gas	-Oil Ratio	Gravity 32		
Vented Sold	METHOD OF CO Used on Lease omit ACO-18.)  RECEN	Open Hole	<b>☑</b> Perf.	Production Interva		14-4515			

FEB 1 1 2004

KCC WICHITA

## ALLIEF CEMENTING C., INC. Federal Tax I.D.#

15928

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665

CONFIDENCE

SERVICE POINT:

	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
DATE <b>8-19-03</b>	13	16	28	4:00 PM	6:45 PM		n.11:40 pm
LEASE Bentley	WELL#	1	LOCATION Fens	lennis Z W	est 1/2N	COUNTY	Kansas
OLD OR (NEW)(Ci			east into				
			1 Zan Mwa		1	1	
CONTRACTOR 7	icknel	L		OWNER a	rmen Sc	hmitt	
TYPE OF JOB	unface	m D		CEMENT			
HOLE SIZE /2	5/ 5/		.226		DEDED 11.0	11 70/	
CASING SIZE 8	78		PTH <b>226</b>	_ AMOUNT OF	RDERED 160	DY 130	2
TUBING SIZE			PTH	_ 270 gel		a harma et treta	
DRILL PIPE			PTH PTH	***************************************		ELEASE	
TOOL PRES. MAX			NIMUM	 COMMON	112 11	T dS	em e
MEAS. LINE			DE JOINT	POZMIX	48 Ret		182 4
CEMENT LEFT IN	JCSG /		JL JOHAI	GEL	3 20614		3000
PERFS.	, CBG. 75	2		CHLORIDE	SIMON	CONTUE	MAYSOM
DISPLACEMENT	The state of the s					@	
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	EQU	JIPMENT				_	***************************************
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PUMP TRUCK	CEMENT	ER	Hrailing	Note the second of the second		_	
	HELPER	Sim	-W	- HANDLING	168 a	@ 16.15	193.20
BULK TRUCK		11-		MILEAGE_	160 05	38	319.20
	DRIVER	Steve	<i>T.</i>				
BULK TRUCK				RECEIVI		ТОТАІ	Charles
#	DRIVER			The Land W	traven Receil	IOIAI	1675,60
				FEB 1 1 2	NN4	÷	,4,9,00
	RE	MARKS:			SERVI	CE	
				KCC WICH	HITA		
Ran 8 %	sun laco	casina	to bottom	DEPTH OF J	OB 276'		
Circulate win		< 1/	up to pump take	PUMP TRUC			570m
& mixed 160	70/30 z	02270 a	1 3% cc.	EXTRA FOO	TAGE	@	
Shut day on	chause of	more an	en neveasa 87	MILEAGE _	JB.	_@_3 <i>:</i> D	133.00
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and furnish ceme		_				10111	
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/+		-	9-3	_/\	PRINT	ED NAME	

SWIFT	
Services Inc.	

ADDRESS Carnes Schmidt

RECEIVED

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Nº 6003

TICKET

CITY, STATE, ZIP CODE

FEB 1 1 2004

PAGE OF 1

Servi	.ces, 1	ne.							$\bot$ KCC	; WI	CHIIA			1		
SERVICE LOCATIONS  1. Hugs Lo		WELL/PROJECT NO.		LEA	ise Ber		OUNTY/PARISH Lane	STATE	CITY			DAT	E -5-03	1	NER Came	
2 <u>.</u> 3.		SERVICE SALES	NTRACT	DSYL			IG NAME/NO.	SHIPPED VIA	DELIVERED T	<u>0-1</u>		ORE	DER NO.			
4. REFERRAL LOCATION		WELL TYPE  O;/ INVOICE INSTRUCTION	ONS	WE	^	velopman Cmi	ose 1. Port Collak	Q.	WELL PERMI	NO.		WEL	L LOCATION			
PRICE EFERENCE		/ REFERENCE/ NUMBER	LOC	ACCOUNTING ACCT	DF		DESCRIPTION		QTY.	U/M	QTY.	U/M	UNIT		AMOUNT	
575			1			MILEAGE #103			50	mi			J	50	135	<u>©</u>
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LEGAL TERMS: Cu the terms and conditi but are not limited to	ions on the re	everse side hered	ofwhio	ch include,		REMIT PAYM	MENT TO:	SUR OUR EQUIPMENT WITHOUT BREAKI WE UNDERSTOOI	PERFORMED DOWN?	AGF	REE DECIDED	DIS- AGREE	PAGE TOT	AL	4,50	46
LIMITED WARRAN	ITY provisior	ns.		MII I, and		SWIFT SERVI	CES, INC.	MET YOUR NEED: OUR SERVICE WA PERFORMED WIT	S? \S HOUT DELAY?	-						   <del> </del>
START OF WORK OR DELIVI						P.O. BOX NESS CITY, F		WE OPERATED TO AND PERFORMED CALCULATIONS SATISFACTORILY ARE YOU SATISFI	?	ŀ			TAX 5.3		127	51
DATE SIGNED	TI	ME SIGNED		□ A.M. □ P.M.		785-798-	-2300	□ cus	YES TOMER DID NO	T WISH	□ NO TO RESPOND		TOTAL		4636	197
SWIFT OPERATOR	1) 194	CUSTOME Lack	R ACC		PROVA	TERIALS AND SERVICES T	he customer hereby ackno	owledges receipt of th	ne materials a	nd servic	es listed on th	is ticket.			Thank I	You!



CHARGE TO:		
CARMSD	SCHMODT	
ADDRESS		
1		

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TICKET
Nº 3 5878

FEB 1 1 2004

PAGE	OF
1	1

KCC WICHITA SERVICE LOCATIONS WELL/PROJECT NO. LEASE COUNTY/PARISH STATE ICITY OWNER 1. WESS CONTKS 4 BATLEY SWY 8-31-03 TICKET TYPE CONTRACTOR RIG NAME/NO SHIPPED DELIVERED TO ORDER NO. SERVICE SALES VIA Paren Berg. Co. COMOS WELL TYPE WELL CATEGORY JOB PURPOSE WELL PERMIT NO. WELL LOCATION

4. OD DEVELOPMENT S/2" LONGSWOOD PEDENDE INVOICE INSTRUCTIONS

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	LOC ACCT [			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
575		١			MILEAGE # 104	40	ME			250	100,00
578		1		<u> </u>	DUMP SIQUES	1	308	4585	7-	120000	/200 oc
281		<u> </u>		<u> </u>	MUD FLUSH \$ 5	500	GAL		i	60	3000
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**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT**, **RELEASE**, **INDEMNITY**, and **LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X

DATE SIGNED

8-31-03

TIME SIGNED

1 A.M.

1 P.M.

1 P.M.

**REMIT PAYMENT TO:** 

SWIFT SERVICES, INC. P.O. BOX 466 NESS CITY, KS 67560 785-798-2300

UN- DIS-DECIDED AGREE SURVEY AGREE **PAGE TOTAL** OUR EQUIPMENT PERFORMED 4066 100 #1 WITHOUT BREAKDOWN? WE UNDERSTOOD AND MET YOUR NEEDS? OUR SERVICE WAS #1 PERFORMED WITHOUT DELAY? WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS 7095 TAX a78 SATISFACTORILY? ARE YOU SATISFIED WITH OUR SERVICE? ☐ YES □ NO TOTAL ☐ CUSTOMER DID NOT WISH TO RESPOND

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR
WANE WASON

APPROVAL

CITY, STATE, ZIP CODE

Gerth Hebelman

Thank You!