## 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

Operator: License # 5263	API No. 15 - 119-21137-00-00				
Name: Midwestern Exploration Co.	County: Meade				
Address: 3500 S. Boulevard, Suite 2B	C S2 NE4 Sec. 14 Twp. 32 S. R. 30 East 🗷 West				
City/State/Zip: Edmond, Oklahoma 73013					
Purchaser: None					
Operator Contact Person: Dale J. Lollar					
Phone: (405 ) 340-4300					
Contractor: Name: Duke Drilling	Lease Name: Shank Well #: 1-14				
License: 5929	Field Name: Wildcat				
Wellsite Geologist: Alan Downing	Producing Formation: Dry hole				
Designate Type of Completion:	Elevation: Ground: 2741 Kelly Bushing: 2751				
X New Well Re-Entry Workover	Total Depth: 3895 Plug Back Total Depth: 3380				
OilSWDSIOWTemp. Abd.	Amount of Surface Pipe Set and Cemented atFeet				
GasENHRSIGW	Multiple Stage Cementing Collar Used?				
X Dry Other (Core, WSW, Expl., Cathodic, etc)	If yes, show depth setFeet				
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from				
Operator:					
Well Name:	feet depth to AVI WHM 6-16-06 sx cmt.				
Original Comp. Date: Original Total Depth:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)				
Deepening Re-perf Conv. to Enhr./SWD	Chloride content 18000 ppm Fluid volume bbls				
Plug BackPlug Back Total Depth	Dewatering method used <u>Evaporation</u> Location of fluid disposal if hauled offsite:  Operator Name: <u>NA</u>				
Commingled Docket No					
Dual Completion Docket No					
Other (SWD or Enhr.?) Docket No.					
	Lease Name: License No.:				
4-28-05 5-8-05 7-5-05 Spud Date or Recompletion Date  Date Reached TD Completion Date or Recompletion Date	Quarter Sec TwpS. R East West County: Docket No.:				
Kansas 67202, within 120 days of the spud date, recompletion, workown information of side two of this form will be held confidential for a period of 1 107 for confidentiality in excess of 12 months). One copy of all wireline logs TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells	the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, er or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. I2 months if requested in writing and submitted with the form (see rule 82-3-and geologist well report shall be attached with this form. ALL CEMENTING. Submit CP-111 form with all temporarily abandoned wells.				
A Ma Han Min					
Signature:	KCC Office Use ONLY				
Title: President Date: 4-20-06	Letter of Confidentiality Received				
Subscribed and sworn to before me this 20th day of Ollas	If Denied, Yes Date:				
	Wireline Log Received				
20 VIRGINIA MEANS Notary Public in and for the Biate of Olyaphoma	Geologist Report Received				
Notary Public: My Commission applies 712/2009	UIC Distribution APR 24 20				
Date Commission Expires: July 12, 2007	2006				
	NCC WING				
	Wireline Log Received  Geologist Report Received  UIC Distribution  APR 2 4 2006  KCC WICHITA				

perator Name: Midv	s. R. 30	oration Co.	Lease Name: County:Me			Appropriate the second		
STRUCTIONS: Show	w important tops ar and closed, flowing very, and flow rates	nd base of formations per and shut-in pressures, w if gas to surface test, alo nal geological well site re	ong with final cha	all cores. Report ressure reached art(s). Attach ext	all final copies of d static level, hydrosta ra sheet if more spa	rill stems tes atic pressure ce is needed	ts giving interval s, bottom hole d. Attach copy of all	
rill Stem Tests Taken	- cotal	Yes X No	x	Log Formati	ion (Top), Depth and	l Datum	Sample	
(Attach Additional Sheets) Samples Sent to Geological Survey		Yes X No		rano			Top Datum 2702 +50	
Cores Taken Yes X			W	Wreford 3052 -3		-300 KB -323 KB		
st All E. Logs Run: Dual Indu Compensat Micro Log	ed Neutron	Density						
and the second s		CASING		New Used	ction etc	gentary and a second	All the second of the second o	
Purpose of String	Size Hole	Report all strings set-o	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
Surface	Drilled 12-1/2	Set (In O.D.) 8-5/8"	24#	1658'	A-Con/Comm	on 625	3%CC +1/4# Cellof	
Production	7-7/8	4-1/2"	10.5#	3400'	Prem AAZ	160		
		ADDITIONAL	CEMENTING / S	OUFFZE RECOR	RD			
Purpose:	Depth Top Bottom	Type of Cement		Type and Percent Additives				
Perforate Protect Casing Plug Back TD		None						
Plug Off Zone	**************************************	None					delegaciones per un delegaciones de la companya de	
Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated			Acid, F	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth			
4	3206-10 <b>'</b>			500 ga	500 gal 15% Fe Acd			
		' w/Cement on t	ор				,	
4	3052-62'			1000 g	gal 15% FE A	ed		
			and the state of t					
TUBING RECORD pulled to p	Size 1ug	Set At	Packer At	Liner Run	Yes X No			
Date of First, Resumer	d Production, SWD or	Enhr. Producing Me		wing Pur	mping 🔲 Gas Lii	t X Ot	her (Explain) P & A	
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf _	Water -	Bbis. C	ias-Oil Ratio	Gravity ——	
Disposition of Gas	METHOD OF	COMPLETION		Production In	nterval			

Blue

SER	V I C E S . L L C

**Tubing Size** 

Depth

Volume

Max Press

Annulus Vol.

Packer Depth

Casing

Pressure

3*0*0

PIPE DATA

Type Job

Casing Size

Depth 3403

Max Press 1506

Piug Deptin

Service Units

Time

0030

6430 **200** 

0300

0630

0635 ු විසිත

0810

0830 0835

Well Connection

Customer Representative

LIBERAL

Long STRING

Shots/Ft

From

From

From

From

From

Tubing

Pressure

Daugerty

TREATMENT REPORT Customer ID Custome 5-8-05 M.DWESTERN Well # SHANK County Formation Legal Description 14-325 PERFORATING DATA **FLUID USED** TREATMENT RESUME RATE | PRESS 175 SY A4.2 Max 5 Min. То MUD FLUS H Min 10 Min. To 🦠 Avg Frac 15 Min. То HHP Used Annulus Pressure То Flush Gas Volume Total Load Tò WATER Station Manage Shown JERRY BENNETT FREDERICH ZZS 570 338 **Bbis.** Pumped Rate AN LOCATION, R. 6 Pulling OF HOLE / KIL UP CASERS START IN W CASING LE.E. TRUCKS ON LOC. RECEIVED JOB SAFETY KCC WICHITA ines To P.T. BBIS WATER Spacer BBIS WATER SPACER S

0836 300 306 034/ 3*0*0 0850 0855 100 54 2 0903 500 SLAW RATE 0908 1500 0910 RELEASE FLOAT - HELD 7315 Rump 15 Sp AAZ RAT HOLE 0120 WASH Lines 0930 JOB Complete 10244 NE Hiway 61 • P.O. Box 8613 • Pratt, KS 67124-8613 • Phone (620) 672-1201 • Fax (620) 672-5383