

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1  
September 1999  
Form Must Be Typed

Operator: License # 5970  
Name: JOHN A ELMORE  
Address: 776 HWY 99  
City/State/Zip: SEDAN, KS 67361  
Purchaser: PLAINS  
Operator Contact Person: JOHN A ELMORE  
Phone: (620) 249-2519  
Contractor: Name: DARNEL ROB  
License: 6282  
Wellsite Geologist: NONE

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover  
☒ Oil ☐ SWD ☐ SLOW ☐ Temp. Abd.  
☐ Gas ☐ ENHR ☐ SIGW  
☐ 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. \_\_\_\_\_

9-7-05 9-10-05 9-11-05  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date  
*KCC WITH PER OPER*

API No. 15 - 019-26698-00-00  
County: CHAUTAUQUA  
SE SW NE Sec. 36 Twp. 33 S. R. 11 ☒ East ☐ West  
2475 feet from S / (N) (circle one) Line of Section  
1570 feet from (E) / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) (NE) SE NW SW

Lease Name: SOUTH RANCH Well #: 202

Field Name: SEDAN PERU

Producing Formation: PERU

Elevation: Ground: 920 Kelly Bushing: 925

Total Depth: 1160 Plug Back Total Depth: -

Amount of Surface Pipe Set and Cemented at 40 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from 1152

feet depth to SURFACE w/ 130 sx cmt.

*Alt II w/ 7-17-06*

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

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used \_\_\_\_\_

Location of fluid disposal if hauled offsite:

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. JAN 09 2006 East ☐ West

County: \_\_\_\_\_

RECEIVED  
KANSAS CORPORATION COMMISSION  
Docket No.:  
CONSERVATION DIVISION  
WICHITA, KS

**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 A Elmore*

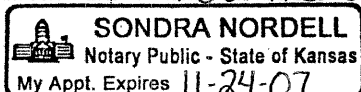
Title: OWNER Date: 01/06/2006

Subscribed and sworn to before me this 6TH day of JANUARY

20 06

Notary Public: *Sondra Nordell*

Date Commission Expires: November 24, 2007



KCC Office Use ONLY

NO Letter of Confidentiality Received

If Denied, Yes ☐ Date: \_\_\_\_\_

NO Wireline Log Received

NO Geologist Report Received

NO UIC Distribution

X

Operator Name: JOHN A ELMORE Lease Name: SOUTH RANCH Well #: 202  
 Sec. 36 Twp. 33 S. R. 11 ☒ East ☐ West County: CHAUTAUQUA

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken ☐ Yes ☒ No ☒ Log Formation (Top), Depth and Datum ☐ Sample  
 (Attach Additional Sheets)

Samples Sent to Geological Survey ☐ Yes ☒ No

Cores Taken ☐ Yes ☒ No

Electric Log Run ☐ Yes ☒ No  
 (Submit Copy)

List All E. Logs Run:

Name Top Datum

**PRECISION WELL PERFORATORS**  
**1151 TO SURFACE**

**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
<b>SURFACE</b>	<b>10"</b>	<b>8 5/8</b>	<b>30</b>	<b>40'</b>	<b>PORTLAND</b>	<b>10</b>	<b>NONE</b>
<b>CASING</b>	<b>6 3/4"</b>	<b>4 1/2</b>	<b>9 1/2</b>	<b>1152</b>	<b>PORTLAND</b>	<b>130</b>	<b>2% GEL</b>

**ADDITIONAL CEMENTING / SQUEEZE RECORD**

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing				
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> 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
<b>2 SPF</b>	<b>1101 TO 1111</b>	<b>250 GAL 15% HCL 900 LB</b>	<b>BREAK</b>
		<b>6000 LB FRACK REEF</b>	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<b>2 3/8</b>	<b>1090'</b>			
Date of First, Resumero Production, SWD or Enhr.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<b>2</b>	<b>0</b>	<b>10</b>		

Disposition of Gas

**METHOD OF COMPLETION**

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease  
 (If vented, Submit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify)

## STATEMENT

06195

## ELMORE'S INC.

Box 87 - 776 HWY99

Sedan, KS 67361

Cell: (620) 249-2519

Eve: (620) 725-5538

Date

9-11-05

RECEIVED  
KANSAS CORPORATION COMMISSION  
JAN 09 2006  
CONSERVATION DIVISION  
WICHITA, KS

Customer John Elmore

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Qty.	Description	Price	Amount
130	sks Cement	7.50	975.00
1	hr Cement Pump	60	60.00
1	hr Water Truck	60	60.00
			1095.00
		Tax	
	Cemented Long String		
	1160' To Surface		
	With 2% Gel IN Cement		
	New		
	Ranch 202		

Thank You -- We appreciate your business!

Rec'd. by \_\_\_\_\_

TERMS: Account due upon receipt of services. A 1½% Service Charge, which is an annual percentage rate of 18% will be charged to accounts after 30 days.