

ORIGINAL

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 # 5893
Name: Pratt Well Service, Inc.
Address: P.O. Box 847
City/State/Zip: Pratt, KS 67124
Purchaser: NCRA
Operator Contact Person: Kenneth C. Gates, President
Phone: (620) 672-2531
Contractor: Name: Murfin Drilling
License: 30606
Wellsite Geologist: Randall Kilian
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SIOW 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. _____
08/03/01 08/08/01 10/13/03
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 051-25100-00-00
County: Ellis
E/2 SE SW Sec. 19 Twp. 11 S. R. 20 East West
740' feet from S N (circle one) Line of Section
2460' feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Dorzweiler Well #: 1-19
Field Name: Nicholson
Producing Formation: LCK/ARB
Elevation: Ground: 2165' Kelly Bushing: 2170'
Total Depth: 3872' Plug Back Total Depth: 3844'
Amount of Surface Pipe Set and Cemented at 8 5/8" to 221' Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set 1610' Feet
If Alternate II completion, cement circulated from _____
feet depth to _____ w/ _____ sx cmt.
AND WITH 714-06

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content 49000 ppm Fluid volume 400 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
County: _____ 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.

Signature: Kenneth C. Gates
Title: President Date: 11/26/03
Subscribed and sworn to before me this 26 day of November,
20 03.
Notary Public: Amy Robertson
Date Commission Expires: 3/13/04

AMY S. ROBERTSON
Notary Public - State of Kansas
My Appt. Expires 3/13/04

KCC Office Use ONLY

Letter of Confidentiality Attached DPW
If Denied, Yes Date: 12-02-03 (CD)
 Wireline Log Received
 Geologist Report Received
 UIC Distribution

✓

Operator Name: Pratt Well Service, Inc. Lease Name: Dorzweiler Well #: 1-19
 Sec. 19 Twp. 11 S. R. 20 East West County: Ellis

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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i> List All E. Logs Run:	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input checked="" type="checkbox"/> 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
Surface Pipe	12 1/4"	8 5/8"	24#	221'	Standard	160	2% gel 3% CC
Long String	7 7/8"	5 1/2"	15 1/2#	3869'	ASC	150	2% gel
Port Collar		5 1/2"		1606'			

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate <input checked="" type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	surface	60/40 Poz 6% gel	210	Port Collar @ 1606'

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
4	Arbuckle	500 gals 20 % HCL	3773'-79'
4	Mississippi	500 gals 20 % HCL	3732'-3741'
3	LKC	PPI tool using 500 gals 15% HCL	3659'-61'
3	LKC	PPI tool using 500 gals 15% HCL	3650'-53'

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
	2 7/8" 8rd	119 Jts		

Date of First, Resumerd Production, SWD or Enhr. 10/24/03	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	5		1		

Disposition of Gas METHOD OF COMPLETION Production Interval

Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled
(If vented, Submit ACO-18.) Other (Specify) _____

ALLIED CEMENTING CO., INC.

6323

Federal Tax I.D.# [REDACTED]

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

SERVICE POINT:

Russell

DATE <u>8-8-01</u>	SEC. <u>19</u>	TWP. <u>11</u>	RANGE <u>20</u>	CALLED OUT <u>NOON</u>	ON LOCATION <u>2:30pm</u>	JOB START	JOB FINISH <u>6:20pm</u>
LEASE <u>Dorzweiler</u>	WELL # <u>19-1</u>	LOCATION <u>Ellis N To church 2w 2 1/2 w</u>			COUNTY <u>Ellis</u>	STATE <u>Kan</u>	
OLD OR <u>NEW</u> (Circle one)							

CONTRACTOR MORFIN #8

TYPE OF JOB Surface Long String

HOLE SIZE 7 7/8 T.D. 3870

CASING SIZE 5 1/2 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT 94 bbls

EQUIPMENT

PUMP TRUCK CEMENTER Bill

177 HELPER Ron

BULK TRUCK

160 DRIVER Shane

BULK TRUCK

DRIVER

OWNER

CEMENT

AMOUNT ORDERED

150 bbl ASC 20% Gal

500 gal Flush

COMMON @

POZMIX @

GEL 3 @ 10.00 30.00

CHLORIDE @

ASC 150 @ 8.50 1275.00

WFR-2 500 gals @ 1.00 500.00

HANDLING 161 @ 1.10 177.10

MILEAGE 44/SK/mile 309.12

RECEIVED

DEC 01 2003

TOTAL 2291.22

REMARKS:

pipe set @ 3869

Shoet 27

Insert 3842

pump 500 gal WFR-2 Follow w/ 135 gal cement

pump plug w/ 94 bbls

Float did hold

15 in Rathole

DEPTH OF JOB

PUMP TRUCK CHARGE 1130.00

EXTRA FOOTAGE @

MILEAGE 48 @ 3.00 144.00

PLUG 1-5/8 Rubber @ 50.00

TOTAL 1324.00

CHARGE TO: Prot Well Service, Inc.

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

P.C. 1610

#55

8- Centralizers @ 50.00 400.00

1- Basket @ 128.00

← Port collar @ 1750.00

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE Cason Hammond

PRINTED NAME

TOTAL 2278.00

ALLIED CEMENTING CO., INC. 14555

Federal Tax I.D.# [REDACTED]

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

SERVICE POINT:

R

DATE <u>10-7-03</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START	JOB FINISH
LEASED <u>DORZWIELE</u>	WELL # <u>19-1</u>	LOCATION <u>ELLIS N TO CHURCH 2W</u>			COUNTY <u>ELLIS</u>	STATE <u>KS</u>	
<input checked="" type="radio"/> OLD OR NEW (Circle one)				<u>2 1/2 in New Ven</u>			

CONTRACTOR PROP WELL

TYPE OF JOB SEARCHED PORT COLLAR

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2 1/2 DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

DISPLACEMENT _____

OWNER _____

CEMENT

AMOUNT ORDERED 375 6 3/4 1050 6 7/8 GEL

USED 210SK

COMMON	<u>126</u>	@	<u>7.15</u>	<u>900.90</u>
POZMIX	<u>84</u>	@	<u>3.80</u>	<u>319.20</u>
GEL	<u>12</u>	@	<u>10.00</u>	<u>120.00</u>
CHLORIDE		@		
		@		
		@		
		@		
		@		
		@		
HANDLING	<u>376</u>	@	<u>1.15</u>	<u>431.25</u>
MILEAGE	<u>5 1/2 SK/MI</u>			<u>956.25</u>

EQUIPMENT

PUMP TRUCK CEMENTER MARK

346 HELPER DAVE

BULK TRUCK

364 DRIVER GLEN

BULK TRUCK

_____ DRIVER _____

RECEIVED

DEC 01 2003

TOTAL 2731.00

2727.60

REMARKS: KCC WICHITA SERVICE

PORT COLLAR @ 1630 - PRES. CSG TO 1000' - OPENED TOOL - MIXED 210SK - CIRC. CEMENT - CLOSED TOOL - PRES TO 1000' - RAN 7 JTS - WASHED CLEAN PULLED TOOLS

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____ 630.00

EXTRA FOOTAGE _____ @ _____

MILEAGE N/C @ _____

PLUG _____ @ _____

_____ @ _____

_____ @ _____

TOTAL 630.00

CHARGE TO: PRATT WELL

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

SHIFTING TOOL @ 150.00 150.00

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL 150.00

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You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME _____