

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE

Operator: License # 5184

Name: Shields Oil Producers, Inc.

Address Shields Bldg.

City/State/Zip Russell, KS 67665

Purchaser: None

Operator Contact Person: Burton Beery

Phone (913) 483-3141

Contractor: Name: Company Tools

License: 5184

Wellsite Geologist: Francis Whisler

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: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Deepening  Re-perf.  Conv. to Inj/SWD  
 Plug Back  PBD  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_

4-26-97 5-1-97 None  
Spud Date Date Reached TD Completion Date

API NO. 15- 141-20,333-00-00 ORIGINAL

County Osborne  
230'

East-SW-SE-NE Sec. 5 Twp. 10 Rge. 12 X W

2970 Feet from  N (circle one) Line of Section

760 Feet from  W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
NE,  SE, NW or SW (circle one)

Lease Name Kendig "C" Well # 1

Field Name Fallis Ext.

Producing Formation None

Elevation: Ground 1940 KB 1945

Total Depth 3255 PBDT None

Amount of Surface Pipe Set and Cemented at 213 Feet

Multiple Stage Cementing Collar Used?  Yes  No

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

If Alternate II completion, cement circulated from \_\_\_\_\_

feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cat.

Drilling Fluid Management Plan P&A 2-4-98 UC  
(Data must be collected from the Reserve Pit)

Chloride content 59,000 ppm Fluid volume 375 bbls

Dewatering method used Evaporation

Location of fluid disposal if hauled offsite: \_\_\_\_\_

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

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter Sec. Twp. S Rng. E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 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 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 Burton Beery

Title Superintendent Date 5-7-97

Subscribed and sworn to before me this 7th day of May 19 97.

Notary Public Ruth Phillips

Date Commission Expires \_\_\_\_\_



K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	Geologist Report Received
Distribution		
<input type="checkbox"/>	KCC	<input type="checkbox"/>
<input type="checkbox"/>	KGS	<input type="checkbox"/>
<input type="checkbox"/>	SWD/Rep	<input type="checkbox"/>
<input type="checkbox"/>	Plug	<input type="checkbox"/>
<input type="checkbox"/>	NGPA	<input type="checkbox"/>
<input type="checkbox"/>	Other	<input type="checkbox"/>
(Specify)		

Operator Name Shields Oil Producers, Inc. Lease Name Kendig "C" Well # 1

Sec. 5 Twp. 10 Rge. 12  East  West County Osborne

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

Drill Stem Tests Taken  Yes  No  
 (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	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
			Anhydrite	1064	+ 881
Howard Lime	2864	- 919			
Topeka Lime	2902	- 957			
Heebner Shale	3137	-1192			
Toronto Lime	3159	-1214			
Lansing-Kansas City	3196	-1251			
TD	3255	-1310			

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	12 1/4	8 5/8	20	213	60-40 Poz Mix	160	2% Gel 3% C.C.

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No

Date of First, Resumed Production, SWD or Inj. D+A Producing Method  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	<u>N-A</u>	<u>N-A</u>			

Disposition of Gas:  Vented  Sold  Other (If vented, submit A)  on Lease

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval \_\_\_\_\_

ORIGINAL

# Shields

OIL PRODUCERS, INC.

R. L. SHIELDS, President



Russell, Kansas

15-141-20333

**FORM ACO-1 DRILL STEM TESTS**

SHIELDS OIL PRODUCERS, INC. LEASE Kendig C-1  
 D.S.T. #1 3170-3210 Times: 30-60-60-60  
 I.H.P. 1562 I.F.P. 33-33 I.S.I.P. 907  
 F.F.P. 40-40 F.S.I.P. 756 F.H.P. 1551  
 Recovery: 30' Oil Cut Mud

D.S.T. #2 \_\_\_\_\_ Times: \_\_\_\_\_  
 I.H.P. \_\_\_\_\_ I.F.P. \_\_\_\_\_ I.S.I.P. \_\_\_\_\_  
 F.F.P. \_\_\_\_\_ F.S.I.P. \_\_\_\_\_ F.H.P. \_\_\_\_\_  
 Recovery: \_\_\_\_\_

D.S.T. #3 \_\_\_\_\_ Times: \_\_\_\_\_  
 I.H.P. \_\_\_\_\_ I.F.P. \_\_\_\_\_ I.S.I.P. \_\_\_\_\_  
 F.F.P. \_\_\_\_\_ F.S.I.P. \_\_\_\_\_ F.H.P. \_\_\_\_\_  
 Recovery: \_\_\_\_\_

D.S.T. #4 \_\_\_\_\_ Times: \_\_\_\_\_  
 I.H.P. \_\_\_\_\_ I.F.P. \_\_\_\_\_ I.S.I.P. \_\_\_\_\_  
 F.F.P. \_\_\_\_\_ F.S.I.P. \_\_\_\_\_ F.H.P. \_\_\_\_\_  
 Recovery: \_\_\_\_\_

D.S.T. #5 \_\_\_\_\_ Times: \_\_\_\_\_  
 I.H.P. \_\_\_\_\_ I.F.P. \_\_\_\_\_ I.S.I.P. \_\_\_\_\_  
 F.F.P. \_\_\_\_\_ F.S.I.P. \_\_\_\_\_ F.H.P. \_\_\_\_\_  
 Recovery: \_\_\_\_\_

D.S.T. #6 \_\_\_\_\_ Times: \_\_\_\_\_  
 I.H.P. \_\_\_\_\_ I.F.P. \_\_\_\_\_ I.S.I.P. \_\_\_\_\_  
 F.F.P. \_\_\_\_\_ F.S.I.P. \_\_\_\_\_ F.H.P. \_\_\_\_\_  
 Recovery: \_\_\_\_\_

RECEIVED  
KANSAS STATE COMMISSION  
1977 MAR - 2 4 11:11

# ALLIED CEMENTING CO., INC. 8448

15-141-2033-00-00

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

ORIGINAL

SERVICE POINT: Russell

DATE <u>5-1-97</u>	SEC <u>5</u>	TWP. <u>10</u>	RANGE <u>12</u>	CALLED OUT <u>4:00pm</u>	ON LOCATION <u>8:00pm</u>	JOB START	JOB FINISH <u>9:45pm</u>
LEASE <u>Kendig</u>			WELL# <u>1</u>	LOCATION <u>6 1/2 N 2 E Lura</u>		COUNTY <u>Osborne</u>	STATE <u>K</u>
OLD OR NEW (Circle one)							

CONTRACTOR Shields Delg

TYPE OF JOB plug

HOLE SIZE <u>7 3/8</u>	T.D.
CASING SIZE	DEPTH
TUBING SIZE	DEPTH
DRILL PIPE <u>4 1/2</u>	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS.	
DISPLACEMENT	

OWNER \_\_\_\_\_

CEMENT AMOUNT ORDERED 200 SK 60/40-6 to # 170

COMMON	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
HANDLING	@	_____
MILEAGE	@	_____

**EQUIPMENT**

PUMP TRUCK # <u>177</u>	CEMENTER <u>Bill L.</u>
	HELPER <u>Glen</u>
BULK TRUCK # _____	DRIVER _____
BULK TRUCK # <u>282</u>	DRIVER <u>Matt</u>

TOTAL \_\_\_\_\_

**REMARKS:**

**SERVICE**

1st plug c 110' w 25 sk  
2nd plug c 80' w 100 sk  
3rd plug c 265' w 40 sk  
4th plug c 40' w 10 sk  
1 skn 2 at hole  
1 skn mouse hole

DEPTH OF JOB	_____
PUMP TRUCK CHARGE	_____
EXTRA FOOTAGE	@ _____
MILEAGE	@ _____
PLUG	@ _____
_____	@ _____
_____	@ _____

TOTAL \_\_\_\_\_

CHARGE TO: Shields Oil

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**FLOAT EQUIPMENT**

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL \_\_\_\_\_

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 Dave Grandy

PRINTED NAME \_\_\_\_\_

# ALLIED CEMENTING CO., INC. 8330

15-141-20333-00-00

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

ORIGINAL

SERVICE POINT: Russell

DATE <u>4-26-97</u>	SEC. <u>5</u>	TWP. <u>10 S</u>	RANGE <u>12 W</u>	CALLED OUT <u>8:30 PM</u>	ON LOCATION <u>9:30 PM</u>	JOB START <u>10:45 PM</u>	JOB FINISH <u>11:15 PM</u>
LEASE <u>KENDIG</u>		WELL # <u>C-1</u>	LOCATION <u>LURAY 6 1/2 N 1 1/4 E INTO</u>		COUNTY <u>OSBORNE</u>	STATE <u>KANSAS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR SHIELDS DRILL RIG #2 OWNER \_\_\_\_\_

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 216'

CASING SIZE 8 5/8 20# DEPTH 215'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 15'

PERFS. \_\_\_\_\_

DISPLACEMENT 12 3/4 85%

CEMENT AMOUNT ORDERED	<u>160 SK 69%</u>	<u>286 gal</u>
	<u>370 CC</u>	
COMMON	<u>96 @ 410</u>	<u>58560</u>
POZMIX	<u>64 @ 315</u>	<u>20160</u>
GEL	<u>3 @ 950</u>	<u>2850</u>
CHLORIDE	<u>5 @ 28.00</u>	<u>140.00</u>
	@ _____	_____
	@ _____	_____
	@ _____	_____
	@ _____	_____
HANDLING	@ <u>105</u>	<u>16800</u>
MILEAGE <u>30m</u>	<u>04</u>	<u>192.00</u>
<b>TOTAL</b>		<u>1315.70</u>

**EQUIPMENT**

PUMP TRUCK CEMENTER [Signature]

# 177 HELPER [Signature]

BULK TRUCK DRIVER [Signature]

# 213

BULK TRUCK DRIVER \_\_\_\_\_

# \_\_\_\_\_

**REMARKS:**

Cement CIRCULATED

[Signature]

**SERVICE**

DEPTH OF JOB	<u>445.00</u>
PUMP TRUCK CHARGE	<u><del>430.00</del></u>
EXTRA FOOTAGE	@ _____
MILEAGE <u>30m</u>	<u>285</u> <u>85.50</u>
PLUG <u>1-8 5/8 WOODEN</u>	@ <u>45.00</u>
	@ _____
	@ _____
<b>TOTAL</b>	
	<u>575.50</u>

CHARGE TO: SHIELDS OIL PRODUCERS

STREET Shields Bldg

CITY Russell STATE Kan ZIP 67665

**FLOAT EQUIPMENT**

_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____
_____	@ _____

RECEIVED  
 KANSAS CEMENT CO.  
 APR 29 11:11 AM '97

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 Burton Beery

PRINTED NAME \_\_\_\_\_