

ORIGINAL

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm ACO-1
September 1999
Form Must Be TypedWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 32953
 Name: ANR PIPELINE COMPANY
 Address: 2135 11TH ROAD
 City/State/Zip: Alden Kansas 67512
 Purchaser: _____ **RECEIVED**
 Operator Contact Person: gary Goad
 Phone: (620) 534-2730 **JAN 12 2004**
 Contractor: Name: Darling Drilling **KCC WICHITA**
 License: 9824 Exp. 8/85
 Wellsite Geologist: _____

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. _____

12-11-03	12-11-03	12-20-03
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 119-21112-00-00
 County: Meade
 _____ ne _____ se Sec. 17 Twp. 33 S. R. 27 ☐ East ☒ West
2440 feet from S / N (circle one) Line of Section
50 feet from E / W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SWLease Name: M.P. 82.3 Well #: 1Field Name: Trunk 100

Producing Formation: _____

Elevation: Ground: 2430 Kelly Bushing: _____Total Depth: 120 Plug Back Total Depth: 20Amount of Surface Pipe Set and Cemented at 20 FeetMultiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 20feet depth to surface w/ 17 sx cmt.**ALT 3 WITH 2-7-07**

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

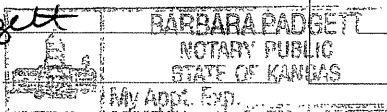
Chloride content _____ ppm Fluid volume 60 bblsDewatering method used vacum truck

Location of fluid disposal if hauled offsite: _____

Operator Name: Gene R DillLease Name: Regier License No.: 6652Quarter _____ Sec. 17 Twp. 33 S. R. 27 ☐ East ☒ WestCounty: Meade 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: Oliver A. DillTitle: Operations Supervisor Date: 1-6-04Subscribed and sworn to before me this 6th day of January20 04Notary Public: Barbara PadgettDate Commission Expires: 2-2-2004

KCC Office Use ONLY

Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

ORIGINAL

Operator Name: ANR PIPELINE COMPANY Lease Name: M.P. 82.3 Well #: 1
 Sec. 17 Twp. 33 S. R. 27 ☐ East ☒ West County: Meade

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
 (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:

☐ Log Formation (Top), Depth and Datum ☐ Sample
 Name Top Datum

RECEIVED

JAN 12 2004

KCC WICHITA

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
Casing	16"	10"	sch 40	20"	Neet	17	

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
____ Perforate				
____ Protect Casing				
____ Plug Back TD				
____ 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

TUBING RECORD		Size	Set At	Packer At	Liner Run ☐ Yes ☐ No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

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) _____	_____