## 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

ORICIAL

Operator: License # 2000  Address: 155 N. Market Suite 900  City/State/Zip: Wichita, KS 67202  Purchaser:  Operator Contact Person: Rod Andersen  Operator: 33436  County: Stafford: Rest from 6 / Wy circle one) Line of Section  Footages Calculated from Nearest Outside Section Corner:  (circle one) NE SE NW SW  Lease Name: Budde Well #: 1  Field Name:  Producing Formation:  Elevation: Ground: 1877 Kelly Bushing: 1887  Total Depth: 3351 Plug Back Total Depth:  Original Comp. Date:  Original Comp. Date:  Original Comp. Date:  Original Comp. Date:  Original Docket No.  Duller (SWD or Enhr.?)  Obeket No.  Outer Corneringled Docket No.  Duller (SWD or Enhr.?)  Obeket No.  Outer Completion Date or Recompletion with one sput date, recompletion, workover or conversion of a well. Flue 823-130, 823-130, 823-130 and 823-107 analytic for the form with all plugged wells. Submit CP-1 form with all plugged wells.		VALORIA
Name: Key Gas Corp.  Address: 155 N. Market Suite 900  Address: 155 N. Market Suite 900  NM SWiss. 27 Twp 24 s. R. 12 East West: 1980 feet from \$\( \) No (cords one) Line of Section Fortages: 1980 feet from \$\( \) No (cords one) Line of Section Fortages: 1980 feet from \$\( \) No (cords one) Line of Section Fortages: 1980 feet from \$\( \) No (cords one) Line of Section Fortages: 23436  Portractor: Name: Fortest Energy  Confractor: Name: Fortest Energy  Confractor: Name: Fortest Energy  License: 33436  Publicines: 33436  Publicines: 33436  Publicines: 33436  Rail Section Fortages: Brown Well #: 1  Field Name: Budde Well #: 1  Field Name: Budde Well #: 1  Field Name: Budde Well #: 1  Field Name: Brown Rearest Outside Section Corner: (cords one) NE SE NW Well #: 1  Field Name: Budde Well #: 1	Operator: License # 32302	API No. 15 - 185-23273-00-00
Address: 155 N. Market Suite 900  ClayState/Dir. Wichita KS. 67202  ClayState/Dir. Wichita KS. 67202  ClayState/Dir. Michita KS. 67202  Contractor: Name: Forrest Energy  License: 33436  Wellstate Geologis:  Cesignate Type of Completion:  Cesignate Type of Completion:  City SWO SIOW Tamp. Abd.  Gas ENHR SIGW  X. Dry Onne (Core. WSW, Expl., Cathodic, etc)  If WorkoverRe-entry: Old Well Info as follows:  Corporator:  Corporato	Name: Key Gas Corp.	County: Stafford
Chysitate/Zip: Wichita, KS. 67202  Purchaser:  Operator Contact Person: Rod Andersed Phone: (316.) 265-2270  Contractor: Name: Forrest Energy  License: 33436  Ucense: 33436  Designate Type of Completion:  X. New Well By SIGW  Signate Type of Completion:  Workover By Signate Signature.  Signature: Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature.  Signature: Signature Signature Signature Signature Signature Signature Signature.  Signature: Signature Signa	Address: 155 N. Market Suite 900	
Purchaser:	City/State/Zin: Wichita, KS 67202	
Operator Contact Person: Rod Anderson Phone: (316 ) 265-2270 Phone: (316 ) 265-2270    Contractor: Name: Forrest Energy   Contractor: Name: Forrest Energy   Contractor: Name: Geologist   Completion:   Completion	Durchager	feet from E / (W) (circle one) Line of Section
Prince: (316.) 265-2270  Contractor: Name: FOTFEST Energy  License: 33436  Designate Type of Completion:  X. Now Well Re-Entry Workover  On SWO SIOW Temp. Abd.  Gas ENHR SIGW X. Dry Cherr (Core, WSW, Expl., Cathodic, etc)  If Workover/Rie-entry: Old Well Info as follows:  Original Comp. Date: Original Total Depth:  Completion Date: Original Total Depth:  Commingled Docket No.  Dual Completion Docket No.  Dual Completion Docket No.  Guar Docket	Purchaser: Rod Andersen	Footages Calculated from Nearest Outside Section Corner:
Lease Name: BUUGE   Well ##	316 \ 265-2270	(choice che)
Fleid Name:	Forrest Energy	Lease Name: Budde Well #: 1
Producing Formation:   Producing Formation:   Elevation: Ground: 1877   Kelly Bushing: 1887   Total Depth: 3351   Plug Back Total Depth:   Amount of Surface Pipe Set and Cemented at 260   Feet Multiple Stage Cementing Collar Used?   Yes Stow Operator:   Yes Stow Multiple Stage Cementing Collar Used?   Yes Stow Multiple Stage Cementing Collar Used?   Yes Stow Operator:   Yes Stow Ope	33436	Field Name:
Designate Type of Completion:  X New Well Re-Entry Workover Oil SWD SIOW Temp. Abd. Gas ENHR SIGW X Dry Other (Core, WSW, Expl., Cathodic, etc) If Workover/Re-entry: Oid Well Info as follows: Operator: Well Name: Original Comp. Date: Original Total Depth: Original Comp. Date: Origi		
Total Depth:		Elevation: Ground: 1877 Kelly Bushing: 1887
Amount of Surface Pipe Set and Cemented at 200 Feet Multiple Stage Cementing Collar Used?   Yes Mild Multiple Stage Cementing Collar Used Cementing Collar Used Cementing Collar Report Received Multiple Stage Cementing Collar Used Cem		1
Multiple Stage Cementing Collar Used?   Yes Sho X Dry Other (Core, WSW, Expl., Cathodic, etc)   If Workover/Re-entry: Old Well Info as follows:   Feet   If Alternate II completion, cement circulated from   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion, cement circulated from   Sx cmt.   Feet   If Alternate II completion   Feet   If Alternate II complet		Amount of Surface Pipe Set and Cemented at 260 Feet
Subscribed and sworn to before me this \$\( \)   Cathodic, etc.		
If Morkover/Re-entry: Old Well Info as follows:  Operator:  Well Name:  Original Comp. Date:  Original Comp. Date:  Original Comp. Date:  Original Comp. Date:  Original Total Depth:  Despening  Re-perf.  Conv. to Enhr/SWD  Plug Back Total Depth  Commingled  Docket No.  Dual Completion  Other (SWD or Enhr.?)  Docket No.  Operator Name:  Lease Name:  License Na.  Li		•
Seet depth to	•	
Well Name:  Original Comp. Date:  Original Total Depth:  Despening  Re-perf.  Conv. to Enhr/SWD  Plug Back  Plug Back  Plug Back Total Depth  Commingled  Docket No.  Dual Compelition  Other (SWD or Enhr.?)  Date Reached TD  Date Reached TD  Date Reached TD  Completion Date  INSTRUCTIONS: An original and two copies of this form shall be filled with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workever or conversion of a well. Fulle 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 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.  Subscribed and sworn to before me this 21 day of Date Market Plan Submit CP-4 form with all plugged wells. Submit CP-111 form with all temporarily abandoned wells.  Notary Public: Date Plans Submit CP-4 form Plans Submit CP-4 form Wireline Log Received  BONITA DANNER. Geologist Report Received  BONITA DANNER. Geologist Report Received  BONITA DANNER. Unclaimed the plans of the statutes. The plans of the statutes 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.  Subscribed and sworn to before me this 21 day of Date Market Plans of the statutes of the statutes. The plans of the statutes of the statutes of the statutes. The plans of the statutes of the statutes of the statutes of the statutes. The plans of the statutes of the		
Original Comp. Date: Original Total Depth:   Claim will be collected from the Reserve Pti)   C3-4   Chloride content   ppm   Fluid volume   bbis   Dewatering method used   Evaporate & Fill   Dewater	•	
Deepening		Drilling Fluid Management Plan ACT I PAN WHAT
Plug Back		4507
Docket No. Dual Completion Docket No. Docket		
Dual Completion  Docket No.  Other (SWD or Enhr.?)  Docket No.  Date Reached TD  Docket No.:  Do		Dewatering method used Evaporate & FIII
Other (SWD or Enhr.?)  Docket No.  10-15-04  10-15-04  Date Reached TD  Docket No.:  D		a second of the
License No.:   4 ZULT		Operator Name:
Spud Date or Recompletion Date  Date Reached TD  Date Reached TD  Date Reached TD  Date Recompletion Date  Completion Date  Completion Date  County:  Docket No.:	Other (SWD or Enhr.?) Docket No	Lease Name: License 58.:1 4 2005
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:    KCC Office Use ONLY	10-13-04	
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:    KCC Office Use ONLY	Code Batto Ci	County: Docket No.:KS
Signature:	Kansas 67202, within 120 days of the spud date, recompletion, worked information of side two of this form will be held confidential for a period of 107 for confidentiality in excess of 12 months). One copy of all wireline logical confidentiality in excess of 12 months.	ver or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply 12 months if requested in writing and submitted with the form (see rule 82-3-s and geologist well report shall be attached with this form. ALL CEMENTING
Title: Glogist Date: 12/21/04 Letter of Confidentiality Attached  Subscribed and sworn to before me this 21 day of DECEMBER.  Wireline Log Received  BONITA DANNER Geologist Report Received  Notary Public: BOWN DOWN  NOTARY PUBLIC STATE OF KANSAS UIC Distribution  Wy Appt. Exp. 2-12-08		ate the oil and gas industry have been fully complied with and the statements
Subscribed and sworn to before me this \$\frac{1}{2} \] day of \$\frac{\int CK MBKR}{\int MBKR}\$. If Denied, Yes \$\square\$ Date:		KCC Office Use ONLY
Notary Public: Bonita Danner	Title: 6-6/09/5t Date: 12/2/10	Letter of Confidentiality Attached
Notary Public: Bonita Danner  Notary Public: My Appt. Exp. 3-12-08  Wireline Log Received  BONITA DANNER  NOTARY PUBLIC  STATE OF KANSAS  UIC Distribution  My Appt. Exp. 3-12-08	Subscribed and sworn to before me this 21 day of NE CA MBV	If Denied, Yes Date:
Notary Public: Bond Danny My Appt. Exp. 2-12-08		
Notary Public: J FMW J CMM STATE OF KANSAS UIC Distribution  My Appt. Exp. 3-17-08	18 1014.	BONITA DANNER Geologist Report Received
7-17-9	Notary Public: 10 Bull Vanua	STATE OF VALUE - UlCobistribution
	Date Commission Expires: 3-17-04	my Appr. Exp. 3-12-08

	key Gas Co		Lease	<sub>Name:</sub> Budde		Well #;	1		
Sec. 27 Twp.	S. R	East X West	County:	Stafford					
temperature, fluid	recovery, and flow rat	and base of formations ng and shut-in pressure tes if gas to surface test ifinal geological well site	close with the	Detail all cores. Repo ut-in pressure reached nal chart(s). Attach e.	ort all final copies d static level, hyd xtra sheet if more	of drill stems rostatic press space is nee	tests giving interval ures, bottom hole ded. Attach copy of		
Orill Stem Tests Ta		Yes X No		Log Forma	tion (Top), Depth	and Datum	X Sample		
Samples Sent to G	ieological Survey	☑ Yes ☐ No		Name Chase		Тор	Datum		
Cores Taken Electric Log Run (Submit Copy)		☐ Yes   X No ☐ Yes   X No		Indian COv Howard Topeka	e				
ist All E. Logs Rur	n:								
				New Used					
Purpose of String	Size Hole	Size Casing	Weight	ce, intermediate, product	T				
Surface	Drilled	Set (In O.D.) 8 5/8	Lbs. / Ft.	Depth	Type of Cement	# Sacjs Used	Type and Percent Additives		
Surrace	Surface 12 ½		24	260	Common	250sx	3%cc		
		ADDITIONAL	CEMENTING /	SQUEEZE RECORD					
Perforate Depth Top Bottom Protect Casing Plug Back TD Plug Off Zone		Type of Cement							
Shots Per Foot	PERFORATION Specify Fo	N RECORD - Bridge Plugs otage of Each Interval Perfo	Set/Type prated	Acid, Fracti	ure, Shot, Cement S	Squeeze Record			
							Depth		
BING RECORD	Size	Set At							
			Packer At	Liner Run	Yes No				
of First, Resumerd P	roduction, SWD or Enhr.	Producing Method	j Flow		Gas Lift	Othor	(Explain)		
nated Production Per 24 Hours	Oil Bbls	Oil Bbls. Gas Mcf		ater Bbls.		Oil Ratio	Gravity		
sition of Gas	METHOD OF COMP	PLETION		Production Interval					
ented Sold ( (If vented, Sumit)	Used on Lease ACO-18.)	Open Hole Other (Specify)	Perl.	<b>-</b>	Commingled		·		



## TREATMENT REPORT

Acid &	Cemen	t 🕮					Acid Stage	e No
Date 92	23-64 Dis	strict 6	B F. 0.	No. 24969	Type Treatment: Amt.	Type Fluid		Pounds of Sand
Company	key	GA S	CORP		Bbl. /Gal			
Well Name & I	NO				,			
Location		,	Field	<i>J</i>	Bbl. /Gal			
County	STALF	ORD	State	<u> </u>	Flush			
Casing: Size	85/8	Type & Wt	2 Y	Set atft.	fromft.			
Formation:				to	fromft.	to,	ft. No.	ft
				to	Actual Volume of Oil/Water to Load	Hole:		Bbl./Gal
Formation				to		41-		
Liner: Size				Bottom atft.	Pump Trucks. No. Used: Std			
				t. toft.	Packer:			
				ſt.	Auxiliary Tools			
Peri	forated from				Plugging or Sealing Materials: Type			
Open Hole Size	e	т.р	ft. P.B.	. to ft.			. Gals.	
	Representativo	Ric	k Deb	enhanp	Treater A16, C	- UKTIS		
TIME a.m/p.m.	PRESS Tubing	Casing	Total Fluid Pumped		REMARK	s		
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## TREATMENT REPORT

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	1		2		Type Treatment:	Amt.	Type Fluid	Sand Size	Pounds of Sand
10-	15-04	61	5 F. 0	25057	1				
Date /	1000	strict	$CON^*O$	. No.	1	• •	•••••		
Well Name &	No 15 4				1				
Location.		_		~	1				
County5	+AFF0	<u>RO</u>	State K	<u>. S</u>	1				
	05		127		1		ft. to		
Casing: Size .	00/8	Type & Wt	٠٠ ري	Set atft.	1		ft. to		
			Perf	to	from		ft. to	ft. No.	ft
				to		COU /Water to Lo	ad Hole:		Bbi /Cul
				to	Actual Volume of	OII / Water to 120	au rime		
				. Bottom atft.	Pump Trucks. No	o. Used: Std		Tv	vin
				ft. toft.	Auxiliary Equipm	nent		***************************************	
				ft.	Packer:			Set at	
					1				
Per	forated from		It. to	ft.	1		эе		
					Plugging or Seatt	ng materials. 191		Cals	
Open Hole Siz	e	T.D	ft. P.I	3. toft.					
		$V_{i}$	700			11.6	(1107	75	
Company I	Representativ	e	ger		Treater	74101	Cujer		
TIME	PRES	SURES	Total Fluid			REMAR	кs		
a.m /p.m.	Tubing	Casing	Pumped						
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Acid Stage No. .....