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

WELL HISTORY - DESCRI	ODICINIA
Operator: License #32044	API No. 15 - 073-23938-00-00 ORIGINA
Name: Cross Oil, L.L.C	County: Greenwood
Address: Box 94	E2_SW_NE_SE_Sec.22_Twp. 23_S. R. 13_ East West
City/State/Zip: Hamilton, KS 66853	1650 feet from S/ N (circle one) Line of Section
Purchaser:	880feet from (E)/ W (circle one) Line of Section
Operator Contact Person: Dennis SMith	Footages Calculated from Nearest Outside Section Corner:
Phone: (_620 _T _678-3813/620-836-5803	(circle one) NE (SE) NW SW
Contractor: Name: Rig 6 Drilling RECEIVE	
icense:	Field Name: North Virgil
	00
Wellsite Geologist: WIIIIam Stout APR 1 5 20 Designate Type of Completion: KCC WICH New Well Re-Entry Workover Oil SWD SIOW Temp Abd	Melevation: Ground: 1163 GL TOPO Bushing: 2150
New Well Re-Entry Workover	Total Depth2150 Plug Back Total Depth: NA/dry hole
OilSWDSIOWTemp. Abd.	Amount of Surface Pipe Set and Cemented atFeet
Oii 5000 forip. Abd.	Multiple Stage Cementing Collar Used?
Gas ENHR SIGW X Dry Other (Core, WSW, Expl., Cathodic, etc)	If yes, show depth set NA Feet
	If Alternate II completion, cement circulated from 40
f Workover/Re-entry: Old Well Info as follows:	feet depth to surface w/ 15 sx cmt.
Operator:	SX CIII.
Original Comp. Date: Original Total Depth:	Drilling Fluid Management Plan (Potential Plants P
DeepeningRe-perfConv. to Enhr./SWD	(Data must be collected from the Reserve Pit) 7-19-2006
Plug Back Plug Back Total Depth	Chloride content NA ppm Fluid volume NA bbls
	Dewatering method used <u>let</u> s @ t to dry up
	Location of fluid disposal if hauled offsite:
Dual Completion Docket No	Operator Name:
Other (SWD or Enhr.?) Docket No	Lease Name: License No.:
12-1-02 12-11-02 12-11-02	Quarter Sec. Twp. S. R. East West
Spud Date or Date Reached TD Completion Date or Recompletion Date	County: Docket No.:
	Dodderio
Kansas 67202, within 120 days of the spud date, recompletion, workov 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 logs TICKETS MUST BE ATTACHED. Submit CP-4 form with all plugged wells	th the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, wer 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 s. Submit CP-111 form with all temporarily abandoned wells.
Signature: Lennis Smith	KCC Office Use ONLY
Title: Operator Date: 4-13-6	
Subscribed and sworn to before me this 14 day of April	If Denied, Yes Date:
19_2003	Wireline Log Received
the March	Geologist Report Received
Notary Public: 3-4-2006	UIC Distribution
CYNTHIA L. HARDIN Notary Public - State of Kansas My Appt. Expires 3-4-2006	

O /ell #:	? 9	G	N	A	

	Cross OII,					Dehlinge Greenwoo		Well #:9		
Sec. 22 Twp. 23 INSTRUCTIONS: Show tested, time tool open at temperature, fluid recove Electric Wireline Logs st	important tops and closed, flowing ery, and flow rates	and shut-ir if gas to su	n pressures, urface test, a	, whether sl along with f	Detail al nut-in pre	I cores. Repor	t all final copies of o	tatic pressure	es, bottom hole	
Drill Stem Tests Taken (Attach Additional Sheets) Samples Sent to Geological Survey Cores Taken Electric Log Run (Submit Copy)		Yes	☐ Yes No		Log Formation (Top), Dep			oth and Datum San		
					Nam	Э		Тор	Datum	
		Yes No Yes No				no logs	R	RECEIVED		
List All E. Logs Run:						APR 1 5 2003				
							KC	C WIC	HITA	
		Report		RECORD	Ne	w Used	ction, etc.			
Purpose of String	Size Hole Drilled	Size	Casing n O.D.)	Weight Lbs. / Ft.		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives	
surface pipe	8 5/8	8 5/8		NA		40 '	portland	10	NA	
			ADDITIONAL	L CEMENTI	NG / SQL	JEEZE RECORI	<u> </u> D			
Purpose:	Ton Bottom		Type of Cement #Sacks \			d Type and Percent Additives				
Perforate Protect Casing Plug Back TD Plug Off Zone		N#.	A			- 31-11				
Shots Per Foot	PERFORATIO Specify F		- Bridge Plu		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth					
	oolage of La	S Zaovi interval i Citorated			(Amount and Kind of Material Used) Depth					

TUBING RECORD	Size	Set At		Packer A	t	Liner Run	Yes No			
Date of First, Resumed Pro	oduction, SWD or Enl	nr. P	roducing Meti	hod	Flowing	Pumpi	ng Gas Lift	Othe	er (Explain)	
Estimated Production Per 24 Hours	Oil E	Bbls.	Gas	Mcf	Wate	r E	ibls. Gas	s-Oil Ratio	Gravity	
Disposition of Gas	METHOD OF CO	OMPLETION				Production Interval				
Vented Sold [Used on Lease ACO-18.)	Γ	Open Hole	Perf.	D	ually Comp.	Commingled			