

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

ORIGINAL

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

CONFIDENTIAL

Operator: License # 3842
LARSON OPERATING COMPANY
Name: A DIVISION OF LARSON ENGINEERING, INC.
Address: 562 WEST HIGHWAY 4
City/State/Zip: OLMITZ, KS 67564-8561
Purchaser: _____
Operator Contact Person: TOM LARSON
Phone: (620) 653-7368
Contractor: Name: MCGOWN DRILLING
License: 5786
Wellsite Geologist: TIM HEDRICK

Designate Type of Completion:

____ New Well ____ Re-Entry ____ Workover
____ Oil ____ SWD ____ SIOW ____ Temp Abd.
____ Gas ____ ENHR ____ SIGW
____ Dry ____ X ____ Other J & A , TWISTED OFF DRILL PIPE @ 1959'

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. _____

6/14/2004 6/23/2004 7/8/2004
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 053-21127-0000

County: ELLSWORTH

NE NW SWSE Sec. 18 Twp. 16 S. R. 7 ☐ East ☒ West

1000 feet from SOUTH Line of Section

2100 feet from EAST Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE **(SE)** NW SW

Lease Name: SCHROEDER TRUST Well #: 2-18

Field Name: WILDCAT

Producing Formation: _____

Elevation: Ground: 1588' Kelly Bushing: DATUM = GL

Total Depth: 1959' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 258 Feet

Multiple State Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ _____ sx cmt.

RECEIVED
KANSAS CORPORATION COMMISSION
OCT 08 2004

Drilling Fluid Management Plan ATTACHED
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
WICHITA, KS

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 information shall be filed with the Kansas Corporation Commission, 130 South 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 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: Thomas J. Ferial

Title: SR. GEOLOGIST Date: 10/7/2004

Subscribed and sworn to before me this 7TH day of OCTOBER,

2004.

Notary Public: Laura E. Alarid

Date Commission Expires: 03/28/2005

LAURA E. ALARID
NOTARY PUBLIC
STATE OF COLORADO

My Commission Expires 03/28/2005

KCC Office Use ONLY

____ Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

____ Wireline Log Received

____ Geologist Report Received

____ UIC Distribution

Operator Name: LARSON OPERATING COMPANY
A DIVISION OF LARSON ENGINEERING, INC. Lease Name: SCHROEDER TRUST Well #: 2-18
 Sec. 18 Twp. 16 S. R. 7 ☐ East ☒ West County: ELLSWORTH

INSTRUCTIONS: Show important tops and base of formation penetrated. Detail all cores. Report all final copes of 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geologist well site report.

Drill Stem Tests Taken (Attach Additional Sheets)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Sample Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	CROUSE	1347'	+241
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	RED EAGLE	1569'	+19
		BASE ROOT SHALE	1871'	-283
		TD	1959	-371

List All E. Logs Run:

CASING RECORD <input checked="" type="checkbox"/> New <input 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"	23	258'	CLASS A	175	2% GEL & 3% CC

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose: <input type="checkbox"/> Perforate <input type="checkbox"/> Protect Casing <input type="checkbox"/> Plug Back TD <input type="checkbox"/> Plug Off Zone	Depth Top Bottom		Type of Cement	# Sacks Used	Type and Percent Additives

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

RECEIVED
KANSAS CORPORATION COMMISSION

OCT 08 2004

CONSERVATION DIVISION
WICHITA, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run			
					<input type="checkbox"/> Yes <input type="checkbox"/> No			
Date of First, Resumed Production, SWD or Enhr.			Producing Method					
			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> 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) _____

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

RECEIVED JUL 6 2004

 * I N V O I C E *

Invoice Number: 093654

Invoice Date: 06/30/04

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

Cust I.D.....: Larson
 P.O. Number...: Schroeder TR #2-18
 P.O. Date.....: 06/30/04

Due Date..: 07/30/04
 Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	175.00	SKS	7.6500	1338.75	T
Gel	3.00	SKS	11.0000	33.00	T
Chloride	5.00	SKS	30.0000	150.00	T
Handling	183.00	SKS	1.2500	228.75	E
Mileage (50)	50.00	MILE	9.1500	457.50	E
183 sks @ \$.05 per sk per mi					
Surface	1.00	JOB	520.0000	520.00	E
Mileage pmp trk	50.00	MILE	4.0000	200.00	E

All Prices Are Net, Payable 30 Days Following Subtotal: 2928.00
 Date of Invoice. 1 1/2% Charged Thereafter. Tax.....: 88.26
 If Account CURRENT take Discount of \$ 292.80 Payments: 0.00
 ONLY if paid within 30 days from Invoice Date Total....: 3016.26

SURF, CSG.

☒ DRLG ☐ COMP ☐ W/O ☐ LOE

AFE #

ACCT # 135/60

APPROVED BY *T.C. Larson*

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 08 2004

CONSERVATION DIVISION
 WICHITA, KS

ALLIED CEMENTING CO., INC.

P.O. BOX 31
 RUSSELL, KS 67665
 PH (785) 483-3887
 FAX (785) 483-5566
 FEDERAL TAX ID# 48-0727860

RECEIVED JUL 15 2004

 * INVOICE *

Invoice Number: 093771

Invoice Date: 07/13/04

Sold Larson Operating Co.
 To: 562 W. HiWay #4
 Olmitz, KS
 67564

Cust I.D.....: Larson

P.O. Number...: Schroeder TR #2-18

P.O. Date.....: 07/13/04

Due Date..: 08/12/04

Terms.....: Net 30

Item I.D./Desc.	Qty. Used	Unit	Price	Net	TX
Common	90.00	SKS	7.6500	688.50	T
Pozmix	60.00	SKS	4.0000	240.00	T
Gel	5.00	SKS	11.0000	55.00	T
Handling	155.00	SKS	1.2500	193.75	T
Mileage (50)	50.00	MILE	7.7500	387.50	T
- 155 sks @ \$.05 per sk per mi					
Rotary Plug	1.00	JOB	520.0000	520.00	T
Mileage pmp trk	50.00	MILE	4.0000	200.00	T

All Prices Are Net, Payable 30 Days Following
 Date of Invoice. 1 1/2% Charged Thereafter.
 If Account CURRENT take Discount of \$ 228.47
 ONLY if paid within 30 days from Invoice Date

Subtotal: 2284.75
 Tax.....: 132.51
 Payments: 0.00
 Total....: 2417.26
 228.47
 2645.73

☒ DRLG ☐ COMP ☐ W/O ☐ LOE

A/E #

ACCT #

APPROVED BY

135/72
 T.C. [Signature]

RECEIVED
 KANSAS CORPORATION COMMISSION

OCT 08 2004

CONSERVATION DIVISION
 WICHITA, KS