

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

ORIGINAL

Operator: License # 3473  
Name: William T. Wax  
Address: P. O. Box 276  
City/State/Zip: McCune, KS 66753  
Purchaser: N/A  
Operator Contact Person: Bill Wax  
Phone: (620) 724-3400  
Contractor Name: Co. Tools  
License: \_\_\_\_\_  
Wellsite Geologist: Bill Wax  
Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)  
If Workover/Re-entry: Old Well Info as follows:  
Operator: N/A  
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. \_\_\_\_\_  
3/27/03      4/5/03      4/15/03  
Spud Date or      Date Reached TD      Completion Date or  
Recompletion Date                Recompletion Date

RECEIVED  
DEC 01 2003  
KCC WICHITA

API No. 15 - 037-21579-00-00  
County: Crawford  
SE SW NW SE Sec. 36 Twp. 30S S. R. 22E  East  West  
1485'FSL \_\_\_\_\_ feet from (S) N (circle one) Line of Section  
2145'FEL \_\_\_\_\_ feet from (E) W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: Hartman Well #: 6  
Field Name: Wildcat  
Producing Formation: None  
Elevation: Ground: 930 Kelly Bushing: 935  
Total Depth: 473' Plug Back Total Depth: N/A  
Amount of Surface Pipe Set and Cemented at 20' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set N/A Feet  
If Alternate II completion, cement circulated from 20'  
feet depth to Surface w/ 3 sx cmt.

Drilling Fluid Management Plan ALII PEA WHM  
(Data must be collected from the Reserve Pit) 4-25-07  
Chloride content Air Drilled ppm Fluid volume N/A bbls  
Dewatering method used N/A  
Location of fluid disposal if hauled offsite: KCC District #3  
Operator Name: N/A  
Lease Name: \_\_\_\_\_ License No. NOV 25 2003  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Docket No.: Shanute KS

RECEIVED  
KCC District #3

**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: [Signature]  
Title: \_\_\_\_\_ Date: 8/19/03  
Subscribed and sworn to before me this 19th day of August,  
20 03.  
Notary Public: Denise M Morgan  
Date Commission Expires: July 24 2007

DENISE M. MORGAN  
Notary Public - State of Kansas  
My Appt. Expires July 24, 2007

**KCC Office Use ONLY**  
 Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

Operator Name: William T. Wax Lease Name: Hartman Well #: 6  
 Sec. 36 Twp. 30S S. R. 22E  East  West County: Crawford API# 15-D37-21579-00-00

**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:  
 None

<input type="checkbox"/> Log Formation (Top), Depth and Datum <input checked="" type="checkbox"/> Sample		
Name	Top	Datum
Bevier Coal	121	+809
Cattlemen Sand	148	+782
Mississippi	470	+460
RTD	473	+457

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	# Sacs Used	Type and Percent Additives
Surface	8-7/8"	6-5/8"	15#	20'	Common	3	1% CCL

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

**RECEIVED**  
 KCC District #3  
 NOV 25 2003  
 Chanute, KS

TUBING RECORD		Size	Set At	Packer At	Liner Run	Disposition of Gas	
NONE					<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Date of First, Resumerd Production, SWD or Enhr.			Producing Method				
Dry Hole			<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		
	N/A	N/A					

Disposition of Gas  Vented  Sold  Used on Lease (If vented, Submit ACO-18.)

METHOD OF COMPLETION  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) Dry Hole

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