

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 # 7155
Name: Bill Farris
Address: 888 State HWY 99
City/State/Zip: Sedan, Kansas, 67361
Purchaser: Coffeyville Resources
Operator Contact Person: Bill Farris
Phone: (620) 725-3772
Contractor: Name: Finney Drilling
License: 5989
Wellsite Geologist: NA
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: _____
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. _____
3-22-04 3-26-04 4-15-04
Spud Date or Date Reached TD Completion Date or
Recompletion Date

API No. 15 - 019-26623-0000
County: Chautauqua
W1/2SESW Sec. 22 Twp. 34 S. R. 11 ☒ East ☐ West
750 feet from (S) N (circle one) Line of Section
3700 feet from (E) W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: White Well #: 33
Field Name: Peru
Producing Formation: Reed Peru
Elevation: Ground: NA Kelly Bushing: NA
Total Depth: 1320 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 40 Feet
Multiple Stage Cementing Collar Used? ☐ Yes ☒ No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from 1320
feet depth to top w/ 160 sx cmt.

Drilling Fluid Management Plan Alt. #2 KGR 6/14/07
(Data must be collected from the Reserve Pit)
Chloride content NA ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: **RECEIVED**
Operator Name: _____ **SEP 02 2004**
Lease Name: _____ License No.: KCC WICHITA
Quarter _____ Sec. _____ Twp. _____ S. R. _____ ☐ East ☐ West
County: _____ 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: Bill Farris
Title: Owner Date: 4-22-04
Subscribed and sworn to before me this 27th day of April, 2004
Notary Public: Rita J. Hebb
Date Commission Expires: 4-12-2008
My Appt. Exp. 4-12-2008

KCC Office Use ONLY

No Letter of Confidentiality Attached
If Denied, Yes ☐ Date: _____

☐ Wireline Log Received
☐ Geologist Report Received
☐ UIC Distribution

Operator Name: Bill FarrisLease Name: WhiteWell #: 33Sec. 22 Twp. 34 S. 1 ☒ East ☐ West

County: _____

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
Redd-Peru		
Redd	1056	1066
Peru	1280	1300

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	# Sacs Used	Type and Percent Additives
Surface	12"	8"	NA	40'	Sack	12	
Prod	6-3/4"	4-1/2"	9-1/2"	1320	bulk	160	

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
1	1056-1066	300 gal acid	
1	1280-1300	Frac 1800	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	2-3/8	1300	NA	<input type="checkbox"/> Yes <input checked="" 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
	4	NA		20

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☒ Vented ☐ Solid ☐ Used on Lease
(If vented, Submit ACO-18.)
☐ Open Hole☒ Perf.☒ Dually Comp.☐ Commingled☐ Other (Specify) _____



CONSOLIDATED
OIL WELL
SERVICES
AN INFINITY COMPANY

211 W. 14TH STREET, CHANUTE, KS 66720
620-431-9210 OR 800-467-8676

ORIGINAL

TICKET NUMBER **23692**

LOCATION Biville

FIELD TICKET

DATE 3-22-04	CUSTOMER ACCT # 2819	WELL NAME White #33	QTR/QTR	SECTION 22	TWP 34	RGE 11	COUNTY Chaut.	FORMATION
CHARGE TO BILL FARRIS				OWNER				
MAILING ADDRESS				OPERATOR				
CITY & STATE				CONTRACTOR				

ACCOUNT CODE	QUANTITY or UNITS	DESCRIPTION OF SERVICES OR PRODUCT	UNIT PRICE	TOTAL AMOUNT
5401	1	PUMP CHARGE LONGSTRING		525.00
	1329'			
1110	32 SX	GILSONITE	*	620.80
1111	800 #	SALT	*	200.00
1118	3 SX	GEL	*	35.40
1107	3 SX	FLO SEAL	*	113.25
1105	3 SX	HULLS	*	38.85
1123	5000 GAL	CITY H₂O	*	56.25
4404	1 ea.	4 1/2 rubber plug	*	27.00
RECEIVED				
SEP 02 2004				
KCC WICHITA				
5407	MIN	BLENDING & HANDLING		190.00
		TON-MILES		
		STAND BY TIME		
		MILEAGE		
5501	3 HR	WATER TRANSPORTS		240.00
5502	3 HR	VACUUM TRUCKS		225.00
		FRAC SAND		
1124	160 SX	CEMENT 50/50	*	1056.00
			* SALES TAX	135.30

Revin 2790

ESTIMATED TOTAL **3462.85**

CUSTOMER or AGENTS SIGNATURE _____

CIS FOREMAN

Jeff Gahan **76%** **207.77**
13,255.08

CUSTOMER or AGENT (PLEASE PRINT) _____

DATE _____

181524