Form ACO-1 September 1999

WELL COMPLETION FORM WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form Must Be Typed

WELL HISTORY - DESCRI	PTION OF WELL & LEASE ORIGINAL
Operator: License #30717	API No. 15 - 195-22, 244-00-00
Name: DOWNING-NELSON OIL CO., INC.	Man a sun
Address: P.O. Box 372	140 N&10 W of
City/State/Zip: Hays, KS 67601	800 [feet from S] (clrcle one) Line of Section
· · · · ·	2630 feet from (a) (clicle one) Line of Section
Purchaser:	
Operator Contact Person: Ron Nelson	Footages Calculated from Nearest Outside Section Corner:
Phone: (_785)_628=3449	(circle one) NE SE NW (SW) Lease Name: Bertha Riedel Well #: 1-27
Contractor: Name: Discovery Drilling Co., Inc.	Field Name: Wildcat
License: 31548	
Wellsite Geologist: Ron Nelson	Producing Formation: LKC
Designate Type of Completion:	Elevation: Ground: 2375 Kelly Bushing: 2383
X New Well Re-Entry Workover	Total Depth: 4190 Plug Back Total Depth:
X Oil SWD SIOW Temp. Abd.	Amount of Surface Pipe Set and Cemented at 210.65 Feet
Gas ENHR SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☐ No
Dry Other (Core, WSW, Expl., Cathodic, etc)	If yes, show depth setFeet
If Workover/Re-entry: Old Well Info as follows:	If Alternate II completion, cement circulated from
Operator:	feet depth tosx cmt.
Well Name:	(10sks In Mouse Hole) (15sks In Rat Hole)
Original Comp. Date: Original Total Depth:	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) ACTIVITY G-21-07
Deepening Re-perf Conv. to Enhr./SWD	Chloride content 17,000 ppm Fluid volume 320 bbls
Plug BackPlug Back Total Depth	
Commingled Docket No.	Location of fluid disposal if hauled offsite:
Dual Completion Docket No	
Other (SWD or Enhr.?) Docket No	Operator Name:
	Lease Name: License No.:
1/17/04 1/24/04 1/25/04 Spud Date or Date Reached TD Completion Date or	Quarter Sec Twp S. R East West
Recompletion Date Recompletion Date	County: Docket No.:
Information of side two of this form will be held confidential for a period of 1 107 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.	2 months if requested in writing and submitted with the form (see rule 82-3- and geologist well report shall be attached with this form. ALL CEMENTING Submit CP-111 form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promulgated to regulationed herein are complete and correct to the best of my knowledge.	te the oil and gas industry have been fully complied with and the statements
Therein are complete and correct to the best of my mornings.	WOO CALLET THE ONLY
Signature: Ruhlsin	KCC Office Use ONLY
Tille: President Date: 1-14-05	Letter of Confidentiality Attached
	If Denied, Yes Date:
Subscribed and sworn to before me this 14 day of January	Wireline Log Received
19 2005	Geologist Report Received
Notary Public: Alexander State Control of the State	UIC Distribution
Date Commission Expires: 11-33-200 (5	ם ביים ביים ביים ביים ביים ביים ביים בי
DAIA COMMINSSION Exhines.	RECEIVED

HOTARY PUBLIC - State of Kansas

1) CERALYN A WERTH

JAN 3 1 2005 KCC WICHITA

Operator Name:DOWI	VING-NELSON	OIL CO., INC.	Lease N	lame:	BERTHA RI	EDEL	Well #:1	-27	
Sec. 27 Twp. 13	s. R. 21W	☐ East ☑ West	County:		Trego	***************************************			زفع
ested, time tool open a emperature, fluid recove	nd closed, flowing ery, and flow rates	d base of formations pe and shut-in pressures, if gas to surface test, a nal geological well site r	whether shu long with fin	ıt-In pres	sure reached s	tatic level, hydro	static pressur	es, bottom hole	
rill Stem Tests Taken (Attach Additional She	90(s)	∑ Yes No	·	wLo Top	g Formatio	n (Top), Depth a	nd Datum	Sample	
amples Sent to Geolog	gical Survey	Yes X No		Name	_		Тор	Datum	
ores Taken lectric Log Run (Submit Copy)		☐ Yes 【 No 【 Yes ☐ No							•
st All E. Logs Run:									
CDNL	/GR,DIL,	Sonic, Micr	olog						
		CASING Report all strings set-o	RECORD	X Nev		on, etc.			
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weigh Lbs./F	ht	Setting Depth	Type of Cement	# Sacjs Used	Type and Pero Additives	ent
urface Pipe	121/4	8 5/8	28		210.65	Common	150	_2%Ge1&3%	<u>CC</u>
roduction St.	. 7\7/8	5 <u>1</u>	14		4188.79	EA/2	150		
	•		Port Co	llar	@ 1749 '		<u> </u>		
-		ADDITIONAL	CEMENTIN	G / SQU	EEZE RECORD	*			
Purpose:	Depth Top Bottom	Type of Cement	#Sacks U	Jsed		Type and F	ercent Additives	3	
Protect Casing Plug Back TD									
Plug Off Zone									
Shots Per Foot	PERFORATION	ON RECORD - Bridge Plug	gs Set/Type			ture, Shot, Cemen		rd Der	
	Specify F	ootage of Each Interval Per	riorated		(Ath	oun and Kno of We	illerial Cool,		
TUBING RECORD	Size	Set At	Packer At		Liner Run	Yes No]	
Date of First, Resumerd F	roduction, SWD or E	nhr. Producing Met	_	Flowing	Pumpir	ig Gas Li	it Oili	ner (Explain)	
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Wate	r Bi	ols. (Bas-Oil Ratio	+ Grav	ity
Disposition of Gas	METHOD OF C	OMPLETION			Production Inter	val			
Vented Sold	Used on Lease	Open Hole	Perf.	Ċ	ually Comp.	Commingled			

LIED CEMENTING CO., INC. 13986 SERVICE POINT: P.O. BOX 31 RUSSELL, KANSAS 67665 JOB START ON, LOCATION CALLED OUT 6:00pm RANGE 3:00 Pm TWP. LOCATION WELL# (Circle one) OWNER ACTOR DISCOURE CEMENT DEJOB SURFACE AMOUNT ORDERED T.D. SIZE 10 DEPTH GSIZE 8 F DEPTH @_7.15 1,072.50 NG SIZE **DEPTH** PIPE COMMON_150 DEPTH **MINIMUM** @ 10.00 30.00 POZMIX SHOE JOINT MAX @ 30.00 150.00 **GEL** S LINE CHLORIDE __ is ENT LEFT IN CSG. 4 66/5 LACEMENT **EQUIPMENT** @ 1.15 172.50 CEMENTER B:11 HANDLING 150 397.50 PTRUCK HELPER DAVE MILEAGE 105/51/MI. 345 TOTAL 1,822.50 KTRUCK DRIVER GARY LK TRUCK DRIVER SERVICE **REMARKS:** 520.00 DEPTH OF JOB PUMP TRUCK CHARGE EXTRA FOOTAGE_ @ 3.50 185.50 ent w/ 150 km, pump plug w/ 12,4 MILEAGE PLUG 1-8-30000 TOTAL _250.50 SHARGE TO: Downing Nelson Oil Co. FLOAT EQUIPMENT STREET _____ STATE ____ZIP_ RECEIVED JAN 3 1 2005 KCC WICHITA

To Allied Cementing Co., Inc.

TOTAL ____



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AC	DRESS	*
CI	Y, STATE, ZIP CODE	

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Serv	ices, Inc.					1					COATE		TOWNE	R	
SERVICE LOCATIONS	WELL/PRO.	JECT NO.		EASE		COUNTY/PARISH	STATE	CITY	(CC	WICH		20-04	See	- a.	
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	RANTY provisions.				SWIFT SE	RVICES, INC.	OUR SERVICE PERFORMED	WAS WITHOUT DELA	Y?						$\dot{\dagger}$
MUST BE SIGNED BY	CUSTOMER OR CUSTOMER'S	AGENT PRIOR	TO		- · · · · ·	BOX 466	WE OPERATE	D THE EQUIPMI MED JOB IS	ENT			TAX		6	, i
START OF WORK OR	DELIVERY OF GOODS						SATISFACTOR	RILY?	1					0	
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SWIFT	
Services, Inc.	_

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S. S. REFERRAL LOCATION	W	SERVICE SALES VELL TYPE O'' IVOICE INSTRUCTION	DNS	WEL	L CAT	eloponent C	RPOSE W. Port Collar			KOC. WELL PERMIT	NO.			WEL	L LOCATION			
PRICE REFERENCE	SECONDARY F PART NU		LOC	CCOUNTING ACCT	DF		DESCRIPTION			QTY.	U/M	QTY.	Ţ	U/M	UNIT PRICE		AMOUNT	
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LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY provisions. MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS				REMIT PA		ENT	URVEY ENT PERFORMED		REE DEC	N- DED	DIS- AGREE	PAGE TO	TAL	430	@			
						WE UNDERSTOOL MET YOUR NEED! OUR SERVICE WA		OOD AND EEDS? EWAS										
				P.O. B	OX 466	PERFORMED WITHOUT DE WE OPERATED THE EQUIP AND PERFORMED JOB CALCULATIONS SATISFACTORILY?		HE EQUIPMEN JOB '?	VT			TAX	TAX		79			
X DATE SIGNED	Til	ME SIGNED		□ A.M. □ P.M.	_		7, KS 67560 98-2300		E YOU SATISFIED WITH OUR SERVICE? YES NO CUSTOMER DID NOT WISH TO RESPOND					TOTAL		452	 79 	
0		CUSTOME	D ACC	EDTANCE	OS M	ATERIALS AND SERVICES	The customer hereby acknowledge	1						is ticket.			F 1 398	

OPERATOR Roger B. Lyberton

APPROVAL

Thank You!

SWIFT Services, Inc. **B** LOG CUSTOMER Alber WELL NO. VOLUME (BBD)(GAL) **DESCRIPTION OF OPERATION AND MATERIALS** 1500 1545 Plug @ 3400' test 0815 0940 10:00 31/2 400 10.30 11:40 Hole Clear run in to wash sund off plu Jos Complete KCC WICHITA