STATE CORPORATION CONHISSION OF KANSAS

OIL & GAS CONSERVATION DIVISION  WELL COMPLETION FORM	County Sedgwick X E
ACO-1 WELL HISTORY	N - W/2 NE - NE Secl 2 Twp. 265 Rge. 22 W
DESCRIPTION OF WELL AND LEASE	
Operator: License # 30178	Feet from SAD (circle one) Line of Section
Name: Ohaebosim Medical Clinic	990 Feet from 6/W (circle one) Line of Section
Address <sup>2</sup> 810 E. 21st Street	Footages Calculated from Nearest Outside Section Corner:  (R), SE, NW or SW (circle one)
W <u>ichita, KS</u>	Lease Name Edson "B" Well # 4
City/State/Zip 67214	Field Name Greenwich
Purchaser: Koch	Producing Formation <u>Miss</u>
Operator Contact Person: Henry Wofford	Elevation: Ground <u>1334</u> KB <u>1341</u>
Phone ( 316 262-1296	Total Depth 2846 PBTD
Contractor: Name:Jay McKenzie	
License: 31617	Amount of Surface Pipe Set and Cemented at 210 w/120s x & Sun cementing ticket # 5023
Wellsite Geologist: Joe M. Baker	Multiple Stage Cementing Collar Used? Yes No
	If yes, show depth set Feet
Designate Type of Completion New Well Re-Entry Workover	If Alternate II completion, cement circulated from
OilSUDSIOWTemp. Abd.	feet depth tow/sx cmt.
Gas ENHR SIGW  X Dry Other (Core, WSW, Expl., Cathodic, etc)	Drilling Fluid Management Plan DAA 94 12-13-96 At (Data must be collected from the Reserve Pit)
If Workover:	Chloride content 2600 ppm Fluid volume bbl
Operator:	l
Well Name:	Dewater Higgsethod used
Comp. DateOld Total Depth	Location of fluid disposal if hauted diffice.
Deepening Re-perf Conv. to Inj/SWD	Operator Name
Plug Back PBTD PBTD Commingled Docket No.	Lease NameLicense No
Dual Completion Docket NoOther (SWD or Inj?) Docket No	Quarter * Sec Twp S RngE/W
12-22-95 12-30-95 12-3)-(15)	
Spud Date	County Docket No
Room 2078, Wichita, Kansas 67202, within 120 days of the Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of 12 months if requested in writing and submitted with the months). One copy of all wireline logs and geologist well MUST BE ATTACHED. Submit CP-4 form with all plugged w	l be filed with the Kansas Corporation Commission, 130 S. Market e spud date, recompletion, workover or conversion of a well. n side two of this form will be held confidential for a period or he form (see rule 82-3-107 for confidentiality in excess of 13 report shall be attached with this form. ALL CEMENTING TICKETS ells. Submit CP-111 form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promute with and the statements herein are complete and correct to	ulgated to regulate the oil and gas industry have been fully compli the best of my knowledge.
Signature  Title Production Supt.  Subscribed and sworn to before me this 25th day of Maring 19 6.  Notary Public Repaires To b. 2, 1997	K.C.C. OFFICE USE ONLY  Letter of Confidentiality Attached Wireline Log Received  Ch  Distribution  KCC SWD/Rep NGPA  KGS Plug Other  (Specify)

Second   S						DE TWO				,
Sec. 12 Tup. 268 Rge. 2	Operator/Name	haebosim	Medica	al Cli	nic	.ease Nam	e _ Edso	n "B"	Vella	<sub>#</sub> 4
INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem tests of interval tested, time tool open and closed, flowing and shut in pressures, whether shut-in pressure reached static ten hydrostetis pressures, but not open and closed, flowing and shut in pressures, whether shut-in pressure reached static ten hydrostetis pressures) by the pressures and the pressures, whether shut-in pressure reached static ten hydrostetis pressures, whether shut-in pressures reached static ten hydrostetis pressures, whether shut-in pressure reached static ten hydrostetis pressure reached static ten hydrostetis flow pressures, whether shut-in pressure reached static ten hydrostetis pressure; and flow rates if gas to surface turing test. Attach copy of tog.    Depth   D		3 7-2			Ì				3-	
hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if ges to surfiace during test. Attach extras if more space is needed. Attach copy of log.  Drill Stem Tests Taken	sec. <u>12</u> 1wp. <u>20</u>	5 Rge. Z	☐ West					•		
Name	hydrostatic pressure	s. bottom hole	temperatur	ro fluid:	ions per and shu recovery	netrated. It-in pre , and flo	Detail all essures, whet w rates if ga	cores. Report ther shut-in pr s to surface du	t all dril essure re ring test.	l stem tests gi ached static le Attach extra si
No   Samples Sent to Geological Survey   No   Samples Sent Sent Sent Sent Sent Sent Sent Sent	Drill Stem Tests Tak (Attach Additiona	cen al Sheets.)	X Yes	□ <sup>′</sup> No		Log	Formatio	on (Top), Depth	and Datum	s Sample
Test   No   Second   No   Se	Samples Sent to Geol	ogical Survey	忆 . <sub>Yes</sub>	□ No		nsas	City	Top 234	43	
Cherokee SH 2762 -1421 Mississippian 2787 -1446 Mississippian 2787 -1446 Mississippian 2787 -1446  Mississippian 2787 -1446  Mississippian 2787 -1446  DST # 12821-2846  15-30-8-1st open: Weak Blow Died 87min 22No openNo blow. Rec: 5' Mud no shows 1f/ff35-35/35-35/1SFS 487/487 1HFF15811  CASING RECORD   New   Used   Used   Temp: 100Degrees    Report all strings set-conductor, surface, intermediate, production, etc.  Purpose of String   Size Hole   Size Casing   Depth   Cement   Wsed   Additives    Surface   12 1/4" 8 5/8"   21 1/45. 210   Common   120 3% c.c.  ADDITIONAL CEMENTING/SQUEEZE RECORD    Purpose:	Cores Taken		· □ Yes	⊠ No		_				
Mississippian 2787 -1446 Miss. Chert 2836 -1495 DST # 12821-2846 15-30-8-1st open: Weak Blow Died 8rmin 22No open:No blow. Rec: 5' Mud no shows 12No open:No open:No blow. Rec: 5' Mud no shows 12No open:No o	lectric Log Run		U ves	X No						
Miss. Chert 2836 -1495 DST # 12821-2846  15-30-8-1st open: Weak Blow Died 8rmin 22No opennNo blow. Rec: 5' Mud no shows 1f/ff35-35/35-35/1SF3 487/487 1HFF15811  Tempr: 100Degrees  Report all strings set-conductor, surface, intermediate, production, etc.  Purpose of String' Size Hole Size Casing Drilled Set (in 0.0.) Lbs./ft. Depth Type of Sacks Type and Percent Additives  Surface 12 1/4" 8 5/8" 21 1bs. 210' Common 120 3% c.c.  ADDITIONAL CEMENTING/SQUEEZE RECORD  Purpose: Depth Top Bottom Type of Cement #Sacks Used Type and Percent Additives  Perforate Protect Casing Plug Back TD Plug Off Zone  Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth  Shots Per Foot Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth  DAA  DAA  Tignated Record Production, ShD or Inj. Producing Method Plowing Pumping Cas Lift Other (Explain)			163	NO						
DST # 12821-2846  15-30-8-1st open: Weak Blow Died 8rmin 22No openmNo blow. Rec: 5' Mud no shows 1f/ff35-35/35-35/1SFS 487/487 1HFF15811  CASING RECORD   New   Used   Used   Used   New   Used   Used   New   Used   Used   Used   New   Used   Used   Used   New   Used	ist All E.Logs Run:									
22No opennNo blow. Rec: 5' Mud no shows   1f/ff35-35/35-35/1SFS 487/487   1HFF15811   Temp::100Degrees   T						1	OST # 1			1473
Report all strings set-conductor, surface, intermediate, production, etc.  Purpose of Strings   Size Hole   Size Casing   Set (in 0.D.)   Lbs./Ft.   Settling   Type of   Set (in 0.D.)   Lbs./Ft.   Settling   Depth   Cement   Set (in 0.D.)   Cement   Set (in 0.D.)   Cement   Set (in 0.D.)   Cement   Set (in 0.D.)   Set (in 0.D.)   Set (in 0.D.)   Lbs./Ft.   Settling   Type of Cement   Set (in 0.D.)   Set (in 0.D.)   Cement   Set (in 0.D.)   Set (in 0.D.)   Set (in 0.D.)   Set (in 0.D.)   Cement   Set (in 0.D.)   Set (in 0			·		221	No ope	ennNo bl	ow. Rec: 5/1SFS 48	5' Mud 7/487	d no shows 1HFF15811
Purpose of String*   Size Hole Drilled   Size Casing Set (In 0.D.)   Lbs./Ft.   Setting Depth   Type of Cement   Wased Additives    Surface   12 1/4"   8 5/8"   21 1bs.   210"   Common   120   3% C.C.    ADDITIONAL CEMENTING/SQUEEZE RECORD    Purpose: Depth Top Bottom   Type of Cement   #Sacks Used   Type and Percent Additives    Protect Casing Plug Back TD   Plug Off Zone    Shots Per Foot   Perforate   Protect Casing Plug Set   Type   Acid, Fracture, Shot, Cement Squeeze Record    Shots Per Foot   Specify Footage of Each Interval Perforated   (Amount and Kind of Material Used)    Depth Data   Data   Data    Size Hole Size Casing   Type of Cement   #Sacks Used   Type and Percent Additives    Type and Percent Additiv		Report a			الم 🗀 ا	ew U	sed ntermediate	_	_	ees
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Protect Casing Plug Back TD Plug Off Zone  PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated  (Amount and Kind of Material Used)  Depth  Date of First, Resumed Production, SMD or Inj.  Producing Method Flowing Pumping Gas Lift Other (Explain)	•		Type of	Cement	#Sack	s Used	T	ype and Percent	Additive	·s
Plug Off Zone  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  DEING RECORD  Size  Set At  Packer At  Liner Run  Yes  No  Producing Method  Flowing  Pumping  Gas Lift  Other (Explain)	Protect Casing						<del></del>		<del></del>	
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ate of First, Resumed Production, SWD or Inj. Producing Method Flowing Pumping Gas Lift Other (Explain)	UBING RECORD	Size	Set At		Packer	.At	Liner Run	П у П .		
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		Oil	Bbls.	Gas N	Mcf					er (Explain) Gravity
		/*		<u> </u>	·	Water	• • • • •	1	. 1	Silavity
Vented   Production Interval				_	, ,		_ `			
Vented Used on Lease Upen Hole Perf. Dually Comp. Commingled		── Used on Lead it ACO-18.)	ase	□ Open H	lole 📙	Perf.	U Dually C	omp. 🗆 Commir	ngled	
Other (Specify)				Other	(Specify	<i></i>	1.4	*	1 % , 5	1

5030 INVOICE NO.

Your Order No.

Well No.

## CEMENTING AND ACIDIZING, INC **BOX 165**

EUREKA, KANSAS 67045

12-31-95 DATE

Ohaebasim Medical Clinic, Inc.

JMar Drilling

Ohaebosim Medical Clinic 2810 East 21st Wichita, Ks. 67214

Contractor

FOR CUSTOM	ER USE ONE!
Register No.	Voucher No.
Terms Approved	Price Approved
Calculations Checked	
Adjustments	
Accounting Distribution	
Audited	Final Approval
	. •••

Requisition No Size Casing Sedgwick 260 All Accounts Will Bear 18% Interest After 30 Days. AMOUNT 375.00 EQUIPMENT CHARGE Plug to abandon 31.50 Pump truck mileage EQUIPMENT CHARGE ..... Sacks @ **Bulk Cement** ..... Sacks @ Lite Wate Cement 387.00 90 . . . . Sacks @ 4.30 **Pozmix** ..... Pounds @ Salt ..... Pounds @ Cal. Cl. ..... Pounds @ Amon. Cl. 12.81 150 . . . Pounds @ \_ 8.54 Gel ..... Pounds @ Chip Plug ..... Pounds @ . Sun FR Hulls ..... Pounds @ \_ ...... Pounds @ \_ Flocele ....... Pounds @ 

> Handling & Dumping . 90 .sks.............Cu. Ft. @\_\_\_ Hauling . 3.86 . Tons 15. . . . . Mileage @\_\_\_

45.00 40.53

Subtotal

891.84

Sales Tax

920.48

Invoice Total

When Remitting Please Give Our Invoice Number