

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

Operator: License # 5046  
Name: Raymond Oil Company, Inc.  
Address: PO Box 48788  
City/State/Zip: Wichita, Ks 67202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Clarke T. Sandberg  
Phone: (316) 267-4214  
Contractor: Name: L.D. Drilling, Inc.  
License: 6039  
Wellsite Geologist: Kim Shoemaker

API No. 15 - 101-22052-0000  
County: Lane  
NW SW SE Sec. 05 Twp. 17 S. R. 29  East  West  
1330 feet from (S) N (circle one) Line of Section  
2160 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE (SE) NW SW  
Lease Name: Munsell B Well #: 1  
Field Name: \_\_\_\_\_

Producing Formation: LKC, Cherokee LMS  
Elevation: Ground: 2817 Kelly Bushing: 2822  
Total Depth: 4625 Plug Back Total Depth: 4611  
Amount of Surface Pipe Set and Cemented at 261 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 2310 Feet  
If Alternate II completion, cement circulated from 2310  
feet depth to Surface w/ 460 sx cmt.  
*ALT 2 - rec'd*

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used \_\_\_\_\_  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name: \_\_\_\_\_  
Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_  East  West  
County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  Temporary  
 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. \_\_\_\_\_

<u>10/27/07</u>	<u>11/06/07</u>	<u>2/15/2008</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

RECEIVED  
KANSAS CORPORATION COMMISSION  
FEB 20 2008  
CONSERVATION DIVISION  
WICHITA, KS

**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: Geologist Date: 2/18/2008  
Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
Notary Public: \_\_\_\_\_  
Date Commission Expires: \_\_\_\_\_

*faxed copy enclosed*

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

Operator Name: Raymond Oil Company, Inc. Lease Name: Munsell B. Well #: 1  
 Sec. 05 Twp. 17 S. R. 29  East  West County: Lane

**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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Attach Additional Sheets)  Samples Sent to Geological Survey <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Electric Log Run <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Submit Copy)  List All E. Logs Run:  <b>Radiation Log Micro</b>	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Name</td> <td style="width:20%;">Top</td> <td style="width:20%;">Datum</td> </tr> <tr> <td>Anhydrite</td> <td>2208</td> <td>+614</td> </tr> <tr> <td>Heebner Sh</td> <td>3901</td> <td>-1079</td> </tr> <tr> <td>Lansing</td> <td>3944</td> <td>-1122</td> </tr> <tr> <td>Cherokee Sh</td> <td>4469</td> <td>-1647</td> </tr> <tr> <td>Mississippi</td> <td>4534</td> <td>-1712</td> </tr> <tr> <td>Total Depth</td> <td>4624</td> <td></td> </tr> </table>	Name	Top	Datum	Anhydrite	2208	+614	Heebner Sh	3901	-1079	Lansing	3944	-1122	Cherokee Sh	4469	-1647	Mississippi	4534	-1712	Total Depth	4624	
Name	Top	Datum																				
Anhydrite	2208	+614																				
Heebner Sh	3901	-1079																				
Lansing	3944	-1122																				
Cherokee Sh	4469	-1647																				
Mississippi	4534	-1712																				
Total Depth	4624																					

CASING RECORD <input 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-New	12 1/4"	8 5/8"	24#	261	Common	170	2% Gel, 3% CC
1st Stage Prod	7 7/8"	5 1/2"	14.5#	4611'	6/40 Pozmix	200	7.5% Salt
2nd Stage					Lite	460	1/4# Flo Seal

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
4 ft	4508-19	1500 gals	
2 ft	4474-78	700 gals	
2 ft	4446-50	1000 gals	
2 ft	4428-34		
2 ft	4208-12	500 gals	

Zones Communicated

TUBING RECORD	Size <b>2"</b>	Set At <b>4570'</b>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumerd Production, SWD or Enhr. <b>February 15, 2008</b>	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls. <b>85 Bbls</b>	Gas Mcf	Water Bbls. <b>10 Bbls</b>	Gas-Oil Ratio	Gravity
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Disposition of Gas      METHOD OF COMPLETION      Production Interval

Vented    Sold    Used on Lease     
  Open Hole    Perf.    Dually Comp.    Commingled \_\_\_\_\_  
 (If vented, Submit ACO-18.)       Other (Specify) \_\_\_\_\_

# ALLIED CEMENTING CO., INC.

28769

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:  
Oakley, KS

10-27-07 DATE	SEC. 5	TWP. 17S	RANGE 29W	CALLED OUT	ON LOCATION 10:00pm	JOB START 6:00pm	JOB FINISH 11:30pm
Monsell LEASE	WELL # B-1	LOCATION Nealy 16. 1/4 S - 2 3/4 E			COUNTY Lawrence	STATE KS	
OLD OR NEW (Circle one)		1/4 N - Win					

CONTRACTOR LD Dnk

TYPE OF JOB Surface

HOLE SIZE 1 7/8 T.D. 264'

CASING SIZE 8 5/8 DEPTH 261'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 15'

PERFS. \_\_\_\_\_

DISPLACEMENT 15.6 Bbls

OWNER Same

CEMENT AMOUNT ORDERED 170 10m 390cc

290cc

COMMON	<u>170</u>	@ <u>12.60</u>	<u>2142.00</u>
POZMIX		@	
GEL	<u>3</u>	@ <u>16.65</u>	<u>49.95</u>
CHLORIDE	<u>6</u>	@ <u>46.60</u>	<u>279.60</u>
ASC		@	
		@	
		@	
		@	
		@	
		@	
		@	
		@	
HANDLING	<u>179</u>	@ <u>1.90</u>	<u>340.10</u>
MILEAGE	<u>109.5</u>	@ <u>8.50/mile</u>	<u>918.25</u>
TOTAL			<u>3229.93</u>

**EQUIPMENT**

PUMP TRUCK CEMENTER Fuzzy

# 417 HELPER Kelly

BULK TRUCK

# 377 DRIVER Alvin

BULK TRUCK

# \_\_\_\_\_ DRIVER \_\_\_\_\_

**REMARKS:**

Cement did circulate  
in cellar  
plug down @ 11:15pm

Thanks Fuzzy & crew

**SERVICE**

DEPTH OF JOB	<u>261'</u>		
PUMP TRUCK CHARGE			<u>815.00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>57</u>	@ <u>6.00</u>	<u>342.00</u>
MANIFOLD + head		@	<u>100.00</u>
		@	
		@	
TOTAL			<u>1257.00</u>

CHARGE TO: Raymond O. I Co.

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

1 - 8 5/8 sur plug	@	<u>60.00</u>
	@	
	@	
	@	
	@	
TOTAL		<u>60.00</u>

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE Bill Owen

Bill Owen  
PRINTED NAME



KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form AGO-1  
September 1999  
Form Must Be Typed

Operator: License # 5046  
Name: Raymond Oil Company, Inc.  
Address: PO Box 48788  
City/State/Zip: Wichita, Ks 67202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: Clarke T. Sandberg  
Phone: (316) 267-4214  
Contractor: Name: L.D. Drilling, Inc.  
License: 8039  
Wellsite Geologist: Kim Shoemaker  
Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  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. \_\_\_\_\_  
10/27/07 11/06/07 2/15/2008  
Spud Date or Date Reached TD Completion Date or  
Recompletion Date Recompletion Date

API No. 15 - 101-22062-0000  
County: Lane  
\_\_\_\_\_ Sec. 05 Twp. 17 S. R. 29  East  West  
1330 feet from S / N (circle one) Line of Section  
2160 feet from E / W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: Munseil B Well #: 1  
Field Name: \_\_\_\_\_  
Producing Formation: LKC, Cherokee LMS  
Elevation: Ground: 2817 Kelly Bushing: 2822  
Total Depth: 4625 Plug Back Total Depth: 4611  
Amount of Surface Pipe Set and Cemented at 281 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set 2310 Feet  
If Alternate II completion, cement circulated from 2310  
feet depth to Surface w/ 460 ex-cmt.

Drilling Fluid Management Plan  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Dewatering method used: \_\_\_\_\_  
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 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 slide 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: Geologist Date: 2/18/2008  
Subscribed and sworn to before me this 18 day of February  
2008  
Notary Public: Tammy J Zimmerman  
Date Commission Expires: 5-19-2010



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

**RECEIVED**  
KANSAS CORPORATION COMMISSION  
**MAY 13 2008**  
CONSERVATION DIVISION  
WICHITA, KS

Side Two

Operator Name: Raymond Oil Company, Inc. Lease Name: Munsell B Well #: 1  
 Sec. 05 Twp. 17 S. R. 29  East  West County: Lane

**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:

Radiation Log  
 Micro

Formation (Top), Depth and Datum	Sample
Name	Top Datum
Anhydrite	2208 +814'
Heebner Sh	3901 -1079
Lansing	3844 -1122
Cherokee Sh	4469 -1647
Mississippi	4534 -1712
Total Depth	4624

CASING RECORD <input 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	# Bags Used	Type and Percent Additives
Surface-New	12 1/4"	8 5/8"	24#	261	Common	170	2% Gel, 3% CC
1st Stage Prod	7 7/8"	5 1/2"	14.5#	4611'	8/40 Pozmix	200	7.5% Salt
2nd Stage					Lite	460	1/4# Flo Seal

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Bags 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 Plug Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
4 ft	4508-19	1500 gals	
2 ft	4474-78	700 gals	
2 ft	4446-50	1000 gals	
2 ft	4428-34		
2 ft	4208-12	500 gals	

*Zones Communicated*

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2"	4570'		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First Resumed Production, SWD or Enhr.	Producing Method
February 15, 2008	<input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mol	Water Bbls.	Gas-Oil Ratio	Gravity
	85 Bbls		10 Bbls		

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

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

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

**RECEIVED**  
 KANSAS CORPORATION COMMISSION  
**MAY 13 2008**  
 CONSERVATION DIVISION  
 WICHITA, KS

RAYMOND OIL COMPANY, INC.

P. O. BOX 48788

155 NORTH MARKET, SUITE 800

TELEPHONE 316-267-4214

WICHITA, KANSAS 67201-8788

February 18, 2008

Kansas Corporation Commission  
Conservation Division  
130 South Market, Room 2078  
Wichita, KS 67202-3802

Re: #1 Munsell B

Gentlemen:

Please find enclosed the following completed form(s) covering the above referenced well:

Form ACO-1, Well Completion Form, one original and two copies,  
along with the cementing tickets and well logs.

Very truly yours,

RAYMOND OIL COMPANY, INC.



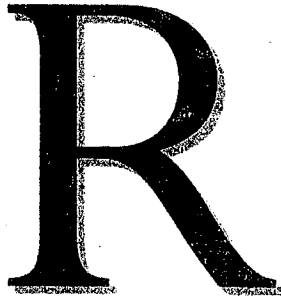
Tammy Zimmerman  
Land and Legal

Enclosures

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KANSAS CORPORATION COMMISSION

FEB 20 2008

CONSERVATION DIVISION  
WICHITA, KS



Raymond Oil Company, Inc.

P.O. Box 48788

Wichita, KS 67201

Telephone (316) 267-4214

Facsimile: (316) 267-4218

FAX MESSAGE

Date: 5/13/2008

Dane

Company:

Fax:

Phone:

From: Tommy

Fax:

Phone: (316) 267-4214

(316) 267-4218

Subject:

including this cover page.

RECEIVED  
KANSAS CORPORATION COMMISSION

MAY 13 2008

CONSERVATION DIVISION  
WICHITA, KS



# KANSAS

## CORPORATION COMMISSION

Kathleen Sebelius, Governor Thomas E. Wright, Chairman Michael C. Moffet, Commissioner Joseph F. Harkins, Commissioner

March 04, 2008

RAYMOND OIL COMPANY, INC.  
PO BOX 48788  
WICHITA, KS 67202-1822

RE: API Well No. 15-101-22052-00-00  
MUNSELL B 1  
NWSWSE, 5-17S-29W  
LANE County, Kansas

Dear Operator:

An affidavit of completion form (ACO-1) on the above referenced well was received on February 20, 2008. Technical review finds that the ACO-1 is incomplete. The information requested below, or an amended/corrected ACO-1, must be submitted by March 21, 2008. Only the current ACO-1 form will be accepted (Form ACO-1, Rev. 9-99), and only the lines marked below apply.

- |   |   |
|---|---|
| <input type="checkbox"/> All drilling and completion information. No ACO-1 has been received as of this date. | <input type="checkbox"/> TD and Completion date. (Month, Day, Year)   |
| <input checked="" type="checkbox"/> Must be notarized and signed.   | <input type="checkbox"/> Must have Footages from nearest outside corner of section.   |
| <input type="checkbox"/> Must have the ORIGINAL HARD COPY of ACO-1.   | <input type="checkbox"/> Side two on back of ACO-1 must be completed.   |
| <input type="checkbox"/> We do not accept fax copies.   | <input type="checkbox"/> Must have final copies of DST's/Charts.  |
| <input type="checkbox"/> Must be put on new form and typed.   | <input type="checkbox"/> All original complete open and cased hole wireline logs run.   |
| <input type="checkbox"/> API # or date when original well was first drilled.                                  | <input type="checkbox"/> A copy of geological reports compiled by wellsite geologist.   |
| <input type="checkbox"/> Contractor License #.  | <input type="checkbox"/> A copy of all cement job logs showing type, amounts and additives used to cement casing strings, squeeze and/or to plug and abandon. (Note: Cement tickets must be from company providing the cement, not necessarily the contractor.) |
| <input type="checkbox"/> Designate type of Well Completion.   | <input type="checkbox"/> Any commingling information; File on the ACO-4 form.   |
| <input type="checkbox"/> If Workover/Re-entry, need old well information, including original completion date. | <input type="checkbox"/> Anything HIGHLIGHTED on ACO-1.   |
| <input type="checkbox"/> Spud date. (Month, Day, Year)  |   |
| <input type="checkbox"/> Other:   |   |

K.C.C. regulation 82-3-107 provides confidentiality, upon written request, for a period of one year from the date of such letter request. Confidentiality rights are waived if the ACO-1 remains incomplete, or is not timely filed (within 120 days from the well's spud date) including: electric logs, geologist's wellsite reports, driller's logs, and Kansas Geological Survey requested samples.

Do not hesitate to call the Kansas Corporation Commission, Conservation Division, at (316) 337-6200 if there are any questions. PLEASE RETURN THIS FORM AND ANY ENCLOSURES WITH YOUR REPLY. Note: If the intent is incorrect, you need to file a corrected intent.

Sincerely,



Steve Bond

Production Department



CONSERVATION DIVISION

Finney State Office Building, 130 S. Market, Room 2078, Wichita, KS 67202-3802  
(316) 337-6200 • Fax (316) 337-6211 • <http://kcc.ks.gov/>