

15-163-30231-00-00

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
WELL COMPLETION FORM
ACO-1 WELL HISTORY
DESCRIPTION OF WELL AND LEASE

ORIGINAL

API NO. 15- Completed 11-20-66
County Rooks
NW - NW - NW - SW Sec. 13 Twp. 9S Rge. 16 E/W

Operator: License # 6597

Name: A.H. Krueger Jr.

Address 211 Circle Dr.

City/State/Zip Hays, KS. 67601

Purchaser: N/A

Operator Contact Person: A.H. Krueger Jr.

Phone (913) 625-6936

Contractor: Name: D & D Drilling

License: N/A

Wellsite Geologist: James Daniels

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: _____

Comp. Date _____ Old Total Depth _____

Deepening _____ Re-perf. _____ Conv. to Inj/SWD _____
Plug Back _____ PBTB _____
Commingled _____ Docket No. _____
Dual Completion _____ Docket No. _____
Other (SWD or Inj?) _____ Docket No. _____

11-10-66 11-20-66 11-30-66

Spud Date Date Reached TD Completion Date

2310 Feet from SW (circle one) Line of Section

4950 Feet from EW (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)

Lease Name Dorr Well # 1-C

Field Name Laton

Producing Formation KC Lime

Elevation: Ground 2064 KB 2069

Total Depth 3466 PBTB 3389

Amount of Surface Pipe Set and Cemented at 136 Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 136'
feet depth to surface w/ 150 C/A ex cmt.

Drilling Fluid Management Plan ALT 1 JH. 10-25-93
(Data must be collected from the Reserve Pit)

Chloride content N/A ppm Fluid volume _____ bbls

Dewatering method used _____

Location of fluid disposal if hauled offsite: _____

Operator Name _____

Lease Name _____ License No. _____

STATE CORPORATION COMMISSION RECEIVED
County _____ Sec. _____ Twp. _____ S Rng. _____ E/W

County _____ Docket No. _____

SEP 24 1993

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the well completion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information on 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 A.H. Krueger Jr.

Title Owner Date 9/23/93

Subscribed and sworn to before me this 23 day of September, 1993.

Notary Public Dorothy A. Klaus

Date Commission Expires December 13, 1993

DOROTHY A. KLAUS
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 12-13-93

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other (Specify)

Operator Name A.H. Krueger Jr. Lease Name Dorr Well # C-1

Sec. 13 Twp. 9S Rge. 16 East West
 County Rooks

JAN 19 1960

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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

See Attached Log .

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	10 3/4"	8 5/8"	NA	136'	Common	150	✓
Production	7 7/8"	4 1/2"	10#	3466'	60-40 POS	250	✓

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
	3164 - 3176 ; 3284 - 3290 ; 3292 - 3294 ;	4000 GAL 12% HCl	
	3322 - 3325 ; 3331 - 3337	KCC JH	

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

Date of First, Resumed Production, SWD or Inj.	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

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 _____