

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

API NO. 15- 179-210830000

County SHERIDAN

W/2-E/2-SW/4 Sec. 27 Twp. 9 Rge. 28 X W

Operator: License # 6039

1320 Feet from S/N (circle one) Line of Section

Name: L. D. DRILLING, INC.

1650 Feet from E/W (circle one) Line of Section

Address R.R. 1 BOX 183 B

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

City/State/Zip GREAT BEND, KANSAS 67530

Lease Name SIEFKES/HAFFNER Well # 1-27

Purchaser: na

Field Name na

Operator Contact Person: L. D. Davis

Producing Formation na

Phone (316) 793-3051

Elevation: Ground 2757' KB 2762'

Contractor: Name: L. D. Drilling, Inc.

Total Depth 4510' PBDT _____

License: 6039

Amount of Surface Pipe Set and Cemented at 295' Feet

Wellsite Geologist: Kim Shoemaker

Multiple Stage Cementing Collar Used? _____ Yes _____ No

Designate Type of Completion

If yes, show depth set _____ Feet

New Well _____ Re-Entry _____ Workover _____

If Alternate II completion, cement circulated from _____

Oil SWD SLOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

feet depth to _____ w/ _____ sx cmt.

If Workovers:

Drilling Fluid Management Plan D & A 6-6-96
(Data must be collected from the Reserve Pit) LW

Operator: _____

Chloride content _____ ppm Fluid volume _____ bbls

Well Name: _____

Dewatering method used _____

Comp. Date _____ Old Total Depth _____

Location of fluid disposal if hauled offsite: _____

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

Operator Name _____

Lease Name _____ License No. _____

3-21-96 3-38-96 _____

_____ Quarter Sec. _____ Twp. _____ Rge. _____

Spud Date _____ Date Reached TD _____ Completion Date _____

County _____ Docket No. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 207B, 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 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 L. D. Davis
L. D. Davis
Title President Date 4-5-96

Subscribed and sworn to before me this 5th day of April, 19 96.

Notary Public Bessie M. DeWerff
Bessie M. DeWerff
Date Commission Expires 5-20-97

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)

SIDE TWO

Operator Name L. D. Drilling, Inc.

Lease Name Siefkes/Haffner

Well # 1-27

East

County Sheridan

Sec. 27 Twp. 9 Rge. 28

West

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 Datums Sample

Name	Top	Datum
Anhy	2372-2405	(+390)
Topeka	3659	(-897)
Heebner	3878	(-1116)
Toronto	3896	(-1134)
Lansing	3913	(-1151)
Base K/C	4158	(-1396)
Marm.	4196	(-1434)
Ft. Scott	4372	(-1610)
Cherokee	4402	(-1640)
Miss	4483	(-1721)
	4510	(-1748)

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	# Sacks Used	Type and Percent Additives
SURFACE	12 1/4"	8 5/8"	28#	295'	50/50 Poz	185	2% Gel, 3% CC

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

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SMD 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 _____

NOTARY PUBLIC - State of Kansas
BESSIE M. DEWEERT
My Exp. Date _____

L. D. Drilling, Inc.

Attachment to ACO-1

SIEFKES/HAFFNER #1-27

W/2 E/2 SW/4 Sec. 27-9-28

Sheridan Co., Kansas

ORIGINAL

15-179-21083-00-00

DST #1 4066-4160 Lans. I-J-K-L Zones

Times: 30-30-30-30

Blow: 1st open: 3/4" blow dec. to 1/4"

2nd open: no blow

Recovery: 25' DM/few oil specks

IFP: 101-89 FFP: 112-89

ISIP: 1187 FSIP: 1102

RECEIVED
KANSAS CORP COMM
1996 APR -9 A 11: 22

ALLIED CEMENTING CO., INC. 0569

15-179-21083-00-00

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

ORIGINAL

SERVICE POINT:

Russell

DATE <u>2-29-96</u>	SEC. <u>30</u>	TWP. <u>44s</u>	RANGE <u>30W</u>	CALLED OUT <u>8:45AM</u>	ON LOCATION <u>11:00AM</u>	JOB START <u>11:30AM</u>	JOB FINISH <u>2:45 PM</u>
LEASE <u>HAFENER SIEFORS</u>	WELL# <u>1-27</u>	LOCATION <u>GRAINFIELD 9N 1/2E 1/4N</u>		COUNTY <u>OSAGE</u>	STATE <u>KANSAS</u>		

OLD OR NEW (Circle one)

CONTRACTOR L-D DRILLING INC.

TYPE OF JOB ROTARY Plug

HOLE SIZE 7 7/8 T.D. 4510'

CASING SIZE 8 7/8 SURFACE DEPTH 295'

TUBING SIZE _____ DEPTH _____

DRILL PIPE 4 1/2 X-H DEPTH 2370'

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. _____

OWNER _____

CEMENT

AMOUNT ORDERED 190 SK @ 6 1/2 GEL

1/4 # FIO-SEAL

PER SK

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

RECEIVED
KANSAS CORP COMM
1996 APR -9 A 11:23

EQUIPMENT

PUMP TRUCK CEMENTER John

127 HELPER Will

BULK TRUCK _____

212 DRIVER Dave

BULK TRUCK _____

_____ DRIVER _____

REMARKS:

25 SK @ 2370'

100 SK @ 1480'

40 SK @ 340'

10 SK @ 40'

15 SK @ RAT HOLE

TOTAL _____

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG 1-8 7/8 Dry Hole @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: L-D DRILLING, INC.

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

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.

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]

ALLIED CEMENTING CO., INC. 5928

15-179-21083-00-00

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

ORIGINAL

SERVICE POINT: Now City

DATE <u>3-21-96</u>	SEC. <u>27</u>	TWP. <u>9</u>	RANGE <u>28</u>	CALLED OUT <u>4:30PM</u>	ON LOCATION <u>5:30PM</u>	JOB START <u>10:25PM</u>	JOB FINISH <u>10:45PM</u>
LEASE <u>Walsh/Hall</u>	WELL# <u>1-27</u>	LOCATION <u>Harold 911 - Zinto</u>			COUNTY <u>Woodson</u>	STATE <u>KS</u>	

OLD OR NEW (Circle one)

CONTRACTOR L.D.

TYPE OF JOB Sealed

HOLE SIZE 12 1/4" T.D. 297

CASING SIZE 8 1/2" DEPTH 29.5

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. 15'

PERFS. _____

OWNER Same

CEMENT

AMOUNT ORDERED 135 50/50 223

EQUIPMENT

PUMP TRUCK CEMENTER Mike

224 HELPER Bob

BULK TRUCK

69 DRIVER Bill

BULK TRUCK

_____ DRIVER _____

COMMON	@	_____
POZMIX	@	_____
GEL	@	_____
CHLORIDE	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
HANDLING	@	_____
MILEAGE	@	_____

TOTAL _____

REMARKS:

Ran 295' 85" 28" Creamy Sealed Circulation
with Rig cemented with 135 50/50 223
Displaced with 17 1/2" 8 1/2" Jack H. O
Cement seal circulates

Thank you
Allied Cementing
Mike Bob, D.L.

SERVICE

DEPTH OF JOB	_____
PUMP TRUCK CHARGE	_____
EXTRA FOOTAGE	@ _____
MILEAGE	@ _____
PLUG <u>1-85-woodson</u>	@ _____
_____	@ _____
_____	@ _____

TOTAL _____

CHARGE TO: L.D. Drilling

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____

TOTAL _____

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TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

SIGNATURE [Signature]