

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: P.O. Box 48788
City/State/Zip: Wichita, Kansas 67201-2758
Purchaser: _____
Operator Contact Person: Clarke Sandberg
Phone: (316) 267-4214
Contractor: Name: Duke Drilling Co., Inc.
License: 5929
Wellsite Geologist: Rocky Milford

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. _____

03-03-08 03-10-08 3/12/2008
Spud Date or Date Reached TD. Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 007-23256-0000
County: Barber County, Kansas
C SW SE Sec. 2 Twp. 32 S. R. 14 ☐ East ☒ West
828 732 feet from S N (circle one) Line of Section
1888 1818 feet from E W (circle one) Line of Section
G.P.S. - KCC-DIG
Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: LAKE Well #: 1

Field Name: _____

Producing Formation: _____

Elevation: Ground: 1669' Kelly Bushing: 1680'

Total Depth: 3863' Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 292 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☐ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from _____

feet depth to _____ w/ P+A sx cmt.

Drilling Fluid Management Plan Alt 1 NCR 8-1-08
(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 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: Tammy J. Zimmerman

Title: Geologist Date: 3/18/2008

Subscribed and sworn to before me this 18 day of March

08

Notary Public: Tammy J. Zimmerman

Date Commission Expires: 5/19/2010

KCC Office Use ONLY

N Letter of Confidentiality Received

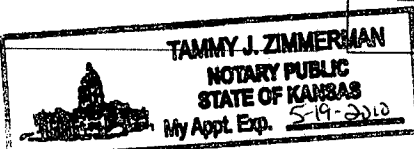
If Denied, Yes ☐ Date: _____

____ Wireline Log Received

____ Geologist Report Received **RECEIVED**
KANSAS CORPORATION COMMISSION

____ UIC Distribution

MAR 19 2008



CONSERVATION DIVISION
WICHITA, KS

ORIGINAL

Operator Name: Raymond Oil Company, Inc.Lease Name: LAKEWell #: 1Sec. 2 Twp. 32 S. R. 14 ☐ East ☒ WestCounty: Barber County, Kansas

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 ☐ NoCores Taken ☐ Yes ☒ NoElectric Log Run ☐ Yes ☒ No
(Submit Copy)

List All E. Logs Run:

☐ Log Formation (Top), Depth and Datum ☒ Sample

Name	Top	Datum
Wabaunsee	2827	-1147
Heebner Sh	3708	-2028
Lwr Dgls Sd	3844	-2164
Total Depth	3863	

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"	24#	292'	60/40 Poz	225	3%cc 2%gel

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	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 ☐ Yes ☐ No
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Date of First, Resumed Production, SWD or Enhr.	Producing Method
	☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, Submit ACO-18.)

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____

RAYMOND OIL COMPANY, INC.

P. O. BOX 48788

155 NORTH MARKET, SUITE 800

TELEPHONE 316-267-4214

WICHITA, KANSAS 67201-8788

March 18, 2008

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

Re: #1 Lake
Section 2-32S-14W
Barber County, Ks

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.

Form CP-1

Form CP-4

Very truly yours,

RAYMOND OIL COMPANY, INC.


Tammy Zimmerman
Land and Legal

Enclosures

RECEIVED
KANSAS CORPORATION COMMISSION

MAR 19 2008

CONSERVATION DIVISION
WICHITA, KS

ALLIED CEMENTING CO., LLC. 31222

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

SERVICE POINT:

DATE <u>3-11-08</u>	SEC. <u>07</u>	TWP. <u>32S</u>	RANGE <u>14W</u>	CALLED OUT <u>1:30pm</u>	ON LOCATION <u>23417</u>	JOB START <u>12:30</u>	JOB FINISH <u>1:30</u>
LEASE <u>1-1/2</u>	WELL # <u>1</u>	LOCATION <u>2014 Ave 3rd 12nd</u>			COUNTY <u>Butler</u>	STATE <u>KS</u>	
OLD OR NEW (Circle one)							

CONTRACTOR Duke E
TYPE OF JOB KOT PLUG
HOLE SIZE 7 7/8 T.D. _____
CASING SIZE 8 5/8 DEPTH _____
TUBING SIZE _____ DEPTH _____
DRILL PIPE _____ DEPTH _____
TOOL _____ DEPTH _____
PRES. MAX _____ MINIMUM _____
MEAS. LINE _____ SHOE JOINT _____
CEMENT LEFT IN CSG. _____
PERFS. _____
DISPLACEMENT 1100

EQUIPMENT

PUMP TRUCK CEMENTER Frank C
243 HELPER Steve K
BULK TRUCK
343 DRIVER Nathan D
BULK TRUCK
_____ DRIVER _____

REMARKS:

Spot plug @ 330 W/500 - 1/4
Wait 1 hour before top plug - 2/4
Plug @ 330 W/500 - 1/4
Plug @ 330 W/500 - 1/4
Plug @ 330 W/500 - 1/4

CHARGE TO: Raymond C/Co
STREET _____
CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
You are hereby requested to rent cementing equipment and furnish cementer and helper(s) 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 and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Frank C

SIGNATURE Frank C

OWNER Raymond C/Co

CEMENT
AMOUNT ORDERED 100 sy 60' 40' 4+3 1/2 cc
135 sy 4+3 1/2 cc

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

TOTAL _____

SERVICE

DEPTH OF JOB 60'
PUMP TRUCK CHARGE _____
EXTRA FOOTAGE @ _____
MILEAGE @ _____
MANIFOLD @ _____
@ _____
@ _____

TOTAL _____

PLUG & FLOAT EQUIPMENT

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

TOTAL _____

SALES TAX (If Any) _____
TOTAL CHARGES _____
DISCOUNT _____ IF PAID IN 30 DAYS

RECEIVED
KANSAS CORPORATION COMMISSION

MAR 19 2008

CONSERVATION DIVISION
WICHITA, KS