

FORM MUST BE TYPED

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

Operator: License # 30178  
Name: Ohaebosim Medical Clinic  
Address: 2810 East 21st  
Wichita, KS 67214  
City/State/Zip  
Purchaser: Koch  
Operator Contact Person: Henry Wofford  
Phone: (316) 262-1296  
Contractor: Name: Allen Drilling Co.  
License: 05418  
Wellsite Geologist: William G. Hart

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  S10W  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  PBTD  
 Commingled Docket No. \_\_\_\_\_  
 Dual Completion Docket No. \_\_\_\_\_  
 Other (SWD or Inj?) Docket No. \_\_\_\_\_

9-21-92 9-28-92 11-15-92  
Spud Date Date Reached TD Completion Date

API NO. 15- 015-23286-00-00 ORIGINAL  
County Butler  
W/2 NW NW Sec. 7 Twp. 26S Rge. 3  E  W

990' 660' Feet from S (circle one) Line of Section  
330 Feet from E (circle one) Line of Section

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

Lease Name Edson "A" Well # 2

Field Name Greenwich

Producing Formation Mississippian

Elevation: Ground 1335 KB 1340

Total Depth 3274 PBSD \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 202' 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/ \_\_\_\_\_ sx cnt.

Drilling Fluid Management Plan But 1 1-15-93 DTD  
(Data must be collected from the Reserve Pit)

Chloride content 1900 ppm Fluid volume 350 bbls

Dewatering method used air-dry

Location of fluid disposal if hauled offsite:  
na

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

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 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 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 Henry Wofford  
Title Consultant Date 1-13-93

Subscribed and sworn to before me this 13th day of January, 1993.

Notary Public Charlotte E. DeLeon

Date Commission Expires 10-1-94

CHARLOTTE E. ALLISON  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. 10-1-94

RECEIVED  
STATE CORPORATION COMMISSION  
JAN 15 1993  
CONSERVATION DIVISION  
WICHITA 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)

PI

SIDE TWO

Operator Name Ohaebosim Medical Clinic

Lease Name Edson "A"

Well # 2

JAN 17 1992  
26S

Sec. 7 Twp. 3 Rge. 3  East  West

County Butler

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: HLS Guard-Neutron

Name	Formation (Top), Depth and Datum		Sample
	Top	Datum	
Lansing	2103	-763	
Kansas City	2345	-1005	
BKC	2506	-1166	
Cherokee	2731	-1391	
Miss Unconf.	2790	-1450	
Miss Chert.	2811	-1471	
Miss Lime	2890	-1550	
Kinderhook	3098	-1758	
Hunton	3153	-1813	
Simpson	3233	-1893	

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 Csg	12 1/4"	8 5/8"	24#	202'	Common	180	3% cc
Production	7 7/8"	5 1/2"	15 1/2 lbs	3271'	Class A	135	3% Sax Gel 500 gal. mud flush

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth
2	2811'	2815' 8 shots	250 Gals./15% Mud Acid	

TUBING RECORD	Size <u>7/8"</u>	Set At <u>3220'</u>	Packer At	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj. November 15, 1992 Producing Method  Flowing  Pumping  Gas Lift  Other (Explain)

Estimated Production Per <u>24</u> Hours	Oil <u>15</u> Bbls.	Gas <u>275</u> Bbls.	Water <u>275</u> Bbls.	Gas-Oil Ratio	Gravity <u>38</u>
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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 MISS



# Ricketts Testing

*Kcc*  
*139 HW*

## ORIGINAL

Company OHAEBOSIM MEDICAL CLINIC Lease & Well No. EDSON #2-A

Elevation 1335 G.L. Formation MISSISSIPPI Effective Pay \_\_\_\_\_ ft. Ticket No. 1621

Date 9-26-92 Sec. 7 Twp. 26S Range 3E County BUTLER State KANSAS

Test Approved by H. WOFFORD Ricketts Representative JIM RICKETTS

Formation Test No. 1 Interval Tested from 2802 ft. to 2815 ft. Total Depth 2815 ft.

Packer Depth 2802 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.

Packer Depth 2799 ft. Size 6 3/4 in. Packer Depth \_\_\_\_\_ ft. Size \_\_\_\_\_ in.

Depth of Selective Zone Set \_\_\_\_\_

Top Recorder Depth (Inside) 2807 ft. Recorder Number 13307 Cap. 4650

Bottom Recorder Depth (Outside) 2810 ft. Recorder Number 13306 Cap. 4625

Below Straddle Recorder Depth \_\_\_\_\_ ft. Recorder Number \_\_\_\_\_ Cap. \_\_\_\_\_

Drilling Contractor Allen Drilling Rig #2 Drill Collar Length 245 I.D. 2.25 in.

Mud Type Chemical Viscosity 47 Weight Pipe Length \_\_\_\_\_ I.D. \_\_\_\_\_ in.

Weight 9.4 Water Loss 9.6 cc. Drill Pipe Length 2782 I.D. 3.25 in.

Chlorides 2,000 P.P.M. Test Tool Length 20 ft. Tool Size 5 1/2 in.

Jars: Make \_\_\_\_\_ Serial Number \_\_\_\_\_ Anchor Length 13 ft. Size 5 1/2 in.

Did Well Flow? No Reversed Out No Surface Choke Size 3/4 in. Bottom Choke Size 3/4 in.

Main Hole Size 7 7/8 in. Tool Joint Size 4 1/2 x h in.

Blow: Strong blow throughout test.

Recovered 260 ft. of Free Oil.

Recovered 15 ft. of Gas & oil cut mud.

Recovered 1080 ft. of Gas in pipe.

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Recovered \_\_\_\_\_ ft. of \_\_\_\_\_

Remarks: 3 TO 4 DAMAGE ON MISSISSIPPI FORMATION

Time Set Packer (s) 12:38 ~~P.M.~~ <sup>A.M.</sup> Time Started Off Bottom 2:38 ~~P.M.~~ <sup>A.M.</sup> Maximum Temperature 105°

Initial Hydrostatic Pressure ..... (A) 1432 P.S.I.

Initial Flow Period ..... Minutes 30 (B) 53 P.S.I. to

(C) 83 P.S.I.

Initial Closed In Period ..... Minutes 30 (D) 508 P.S.I.

Final Flow Period ..... Minutes 30 (E) 99 P.S.I. to

(F) 115 P.S.I.

Final Closed In Period ..... Minutes 30 (G) 502 P.S.I.

Final Hydrostatic Pressure ..... (H) 1421 P.S.I.

RECEIVED  
STATE CORPORATION COMMISSION  
JAN 15 1993  
CONSERVATION DIVISION  
WICHITA, KANSAS

**SERVICE TICKET**

**UNITED CEMENTING & ACID CO., INC.**

**Nº 3562**

BOX 712

EL DORADO, KANSAS 67042

PHONE AC 316-321-4680

DATE 10/13-92 COUNTY Butter  
 CHG. TO: O. Hae basim med. Chem ADDRESS \_\_\_\_\_  
 CITY Wichita, KS STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 LEASE & WELL NO. Everson # 2 SEC. \_\_\_\_\_ TWP. \_\_\_\_\_ RNG. \_\_\_\_\_  
 CONTRACTOR \_\_\_\_\_ TIME ON LOCATION \_\_\_\_\_

KIND OF JOB \_\_\_\_\_  
 SERVICE CHARGE: Pump truck New Well 325.00

QUANTITY	MATERIAL USED TYPE	
250	gals 15% Mud Acid @ .89	222.50
	BULK CHARGE	
	BULK TRK. MILES	
	PUMP TRK. MILES	
	PLUGS	
	SALES TAX	
	TOTAL	547.50

*Pump truck #  
 # 597*

**ORIGINAL**

T. D. \_\_\_\_\_ CSG. SET AT \_\_\_\_\_ VOLUME \_\_\_\_\_  
 SIZE HOLE \_\_\_\_\_ TBG SET AT \_\_\_\_\_ VOLUME \_\_\_\_\_  
 MAX. PRESS. \_\_\_\_\_ SIZE PIPE \_\_\_\_\_  
 PLUG DEPTH \_\_\_\_\_ PKR DEPTH \_\_\_\_\_  
 PLUG USED \_\_\_\_\_ TIME FINISHED \_\_\_\_\_

REMARKS:  
Pump Acid to Lead Hole. Well Breaks @  
600 # & Feeds @ 400 @ 3/4 B.P.M.  
J.S.I.P. 300 5 min - 0 -

EQUIPMENT USED		
NAME	UNIT NO.	NAME

**RECEIVED**  
 STATE CORPORATION COMMISSION  
 JAN 15 1993  
 CONSERVATION DIVISION  
 WICHITA, KANSAS

CEMENTER OR TREATER

OWNER'S REP.

## GENERAL TERMS AND CONDITIONS

All prices are exclusive of any Federal, State or Special Taxes for the sale or use of merchandise or service listed. The amount of taxes required to be paid by the seller shall be added to the quoted prices payable by the buyer.

Unless satisfactory credit has been established, cash payment will be required in advance.

We will make reasonable attempt to get to and from the well under our own power. Should we be unable to do so because of poor or inadequate road conditions, and it becomes necessary to employ a tractor or other pulling equipment, such equipment will be supplied by the customer, or if furnished by us, the cost will be charged to the customer.

We endeavor to design and maintain our equipment to safely service properly drilled and conditioned wells. We carry public liability and property damage insurance, but as there are so many uncertain and unknown conditions not subject to control, we can neither be liable for injuries to property or persons nor for loss or damage arising from the performance of our services or resulting therefrom.

In the event equipment or tools are lost in rendering our services, the customer agrees to make reasonable attempt to recover same. If not recovered, customer agrees to reimburse us for their value.

If a material service is ordered and the customer cancels same after the solution has been prepared, a charge will be made to the customer for the expenses incurred.

Unless otherwise specified, a dead haul charge of \$1.25 per mile, one way, will be made for each service unit ordered but not used.

All prices are subject to change without notice.

All unpaid bills are subject to interest after 60 days from date of invoice.

FIELD TICKET NO. 3655  
 INVOICE NO. 861  
 DATE 9/25/92

# UNITED CEMENTING & ACID CO., INC.

(316) 321-4680

REMIT TO  
 BOX 712  
 EL DORADO, KANSAS 67042

Ohaebosin Medical Clinic  
 2810 E. 21st  
 Wichita, KS 67214

*Rec by hbw*

**ORIGINAL**

FULLY INSURED

DATE OF JOB	COUNTY	STATE	LEASE	P.O. #	WELL NO.
9/22/92	Butler	KS	Edson A		2
SIZE CASING	DEPTH OF WELL	DEPTH OF JOB	PLUG DEPTH		PRESSURE
8 5/8	206	202	187		
surface pipe 150 sx class A cement @ 4.65 5 sx chloride @ 20.00 155 sx handling @ .75 27 bulk truck miles @ 7.75 x .60 x 27 1- 8 5/8 top wooden plug 1 unit					350.00 697.50* 100.00* 116.25* 125.55* 28.00*
					SALES TAX \$ 62.97*
					TOTAL \$ 1,480.27

*paid by  
 ck #603  
 9-22-92*

TERMS: NET 30 DAYS FROM INVOICE DATE  
 PLEASE PAY FROM THIS INVOICE

MAX PRESS

SIZE PIPE 8-1/4

**RECEIVED**  
 STATE CORPORATION COMMISSION  
 JAN 25 1993  
 CONSERVATION DIVISION  
 WICHITA, KANSAS

FIELD TICKET NO.

2331

# UNITED CEMENTING & ACID CO., INC.

REMIT TO

BOX 712

EL DORADO, KANSAS 67042

INVOICE NO.

872

(316) 321-4680

DATE

9/30/92

*Kcc*  
*By Hm*

## ORIGINAL

Ohaebosin Medical Clinic  
2810 East 21st  
Wichita, KS 672214

FULLY INSURED

P.O. #

DATE OF JOB	COUNTY	STATE	LEASE	WELL NO.
9/28/92	Butler	KS	EdsonA	2
SIZE CASING	DEPTH OF WELL	DEPTH OF JOB	PLUG DEPTH	PRESSURE
5 1/2	3271	3269	3232	700#
Long string	1 cementing unit			725.00
	135 sx class A cement @ 4.65			627.75*
	3 sx gel @ 8.00			24.00*
	500 gal mud flush @ .45			225.00*
	138 sx handling charge @ .75			103.50*
	27 bulk truck miles @ (7 x .60 x 27)			113.40*
	1- 5 1/2 guide shoe			80.00*
	1- 5 1/2 AFU insert valve			102.50*
	7- 5 1/2 centralizers @ 28.00			196.00*
	1- 5 1/2 cementing basket			106.00*
	1- 5 1/2 top rubber plug			35.00*
			SALES TAX	\$ 95.18*
			TOTAL	\$ 2,433.33

*Paid by*  
*ck # 602*

TERMS: NET 30 DAYS FROM INVOICE DATE  
PLEASE PAY FROM THIS INVOICE

MAY PRESS

100