

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 31866
Name: RL Investments
Address: 217 Saint Peter St.
City/State/Zip: Morland, KS 67650
Purchaser: EOTT
Operator Contact Person: Leon Pfeifer
Phone: (785) 627-5711
Contractor: Name: Murfin Drilling
License: 30606
Wellsite Geologist: Pat Deenihan

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. _____

4-17-01 4-24-01 5-7-01
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 065-22817-0000

County: Graham

N2-SE - SE Sec. 21 Twp. 29 S. R. 25 ☐ East ☒ West

1100 feet from (S) N (circle one) Line of Section

660 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE (SE) NW SW

Lease Name: Dreiling Well #: 4

Field Name: _____

Producing Formation: LKC

Elevation: Ground: 2608 Kelly Bushing: 2613

Total Depth: 4149 Plug Back Total Depth: 4146

Amount of Surface Pipe Set and Cemented at 219 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 2270

feet depth to 0 w/ 250 sx cmt.

Drilling Fluid Management Plan Well Log 9-11-03
(Data must be collected from the Reserve Pit)

Chloride content 1,800 ppm Fluid volume 3,500 bbls

Dewatering method used Evaporate

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: Leon Pfeifer

Title: Partner Date: 9-6-01

Subscribed and sworn to before me this 6th day of September

2001

Notary Public: Michelle A. Pfeifer

Date Commission Expires: 11-13-04

KCC Office Use ONLY

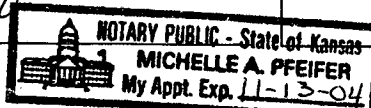
☒ Letter of Confidentiality Attached

If Denied, Yes ☐ Date: _____

☒ Wireline Log Received

☒ Geologist Report Received

☐ UIC Distribution



Operator Name: RL Investment Lease Name: Dreiling Well #: 4
 Sec. 21 Twp. 9 S. R. 25 ☐ East ☒ West County: Graham

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 Guard

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

Name	Any	Top	2259	Datum	+354
Heebner			3856		-1243
Tor			3881		-1268
Lan			3899		-1286
BKC			4122		-1509

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	# Sacs Used	Type and Percent Additives
Surface	12 1/4	8 5/8	20	219	Common	150	3%CC 2%Gel
Production							
Casing	7 7/8	5 1/2	14	4146	Common	125	3/4%CFR, 1/8# Floceal

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate				
<input checked="" type="checkbox"/> Protect Casing	2270 to			
<input type="checkbox"/> Plug Back TD	Surface	Midcon	250	
<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	4074.5 to 4076.5		
4	4059.5 to 4062.5		

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8	4090			
Date of First, Resumerd Production, SWD or Enhr.		Producing Method			
5-14-01		<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 Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	12		0		41

Disposition of Gas

METHOD OF COMPLETION

Production Interval

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

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



CHARGE TO: R-L Investments

ADDRESS _____

CITY, STATE, ZIP CODE _____

TICKET
No 3334

PAGE 1 OF 1

SERVICE LOCATIONS 1. <u>Ness City</u>	WELL/PROJECT NO. <u>4</u>	LEASE <u>Dreiling</u>	COUNTY/PARISH <u>Graham</u>	STATE <u>KS</u>	CITY _____	DATE <u>4-17-01</u>	OWNER <u>Samo</u>
2. _____	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR _____	RIG NAME/NO. <u>Munfin</u>	SHIPPED VIA <u>105</u>	DELIVERED TO <u>N.W. ST Peter</u>	ORDER NO. _____	
3. _____	WELL TYPE <u>Oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Surface</u>	WELL PERMIT NO. _____		WELL LOCATION _____	
4. _____	INVOICE INSTRUCTIONS _____						
REFERRAL LOCATION _____	_____						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT	
		LOC	ACCT	DF								
<u>576</u>		<u>1</u>			MILEAGE <u>105</u>	<u>50</u>	<u>mi</u>			<u>2.50</u>	<u>125</u>	<u>00</u>
<u>576</u>		<u>1</u>			Pump Charge	<u>1</u>	<u>EA</u>	<u>220</u>	<u>FT</u>		<u>500</u>	<u>00</u>
<u>325</u>					STD CMT	<u>150</u>	<u>SKS</u>			<u>6.75</u>	<u>1012</u>	<u>50</u>
<u>279</u>					Gel	<u>3</u>	<u>SKS</u>			<u>11.00</u>	<u>33</u>	<u>00</u>
<u>278</u>					Calcium Chloride	<u>4</u>	<u>SKS</u>			<u>25.00</u>	<u>100</u>	<u>00</u>
<u>581</u>					Bulk service Charge	<u>150</u>					<u>150</u>	<u>00</u>
<u>583</u>					Drayage	<u>368</u>		<u>Ton</u>	<u>Mi</u>	<u>75</u>	<u>276</u>	<u>00</u>

RECEIVED
SEP 07 2001
KCC WICHITA

LEGAL TERMS: Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

x Bill Wynn

DATE SIGNED 4-17-01 TIME SIGNED 5:00 ☐ A.M. ☒ P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.
P.O. BOX 466
NESS CITY, KS 67560
785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	<u>2196</u>	<u>50</u>
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				TAX	<u>56</u>	<u>13</u>
WE UNDERSTOOD AND MET YOUR NEEDS?						
OUR SERVICE WAS PERFORMED WITHOUT DELAY?						
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?						
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	<u>2252</u>	<u>63</u>
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND						

ORIGINAL

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

CREATOR my APPROVAL _____

Thank You!

LOG.

SWIFT Services, Inc. ORIGINAL

DATE 4-24-01 PAGE NO.

CUSTOMER

R-L Investments

WELL NO.

4

LEASE

Drilling

JOB TYPE

2 Stage

TICKET NO.

3344

CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	0830							on Location Rig Laying Down O.P.
	1030							ST 5 1/2 14 # Csg T.D. 415'
								Run Float shoe w/ auto fill, D.V. Baffle on
								Top of shoe joint, Cont on Collars 1, 3, 4, 5,
								7, 9, 40, 44, 57, 61
								Cement Baskets on JTs 15, 42, 59
	1230							D.V. on Top of JT 43 2270'
	1330							Csg on bottom Hook up to circulate w/ mud
	1330	5				300		finish circulating hook up to Cement
								ST 500 gal mud flush
								20 BBL Clay fix water
								125 SKS STD CMT w/ 5% Colseal, 10% Salt,
								1/2% CFR-2, 1/4% D-AIR, 1/8 #/sk Floccle
	1351	2	30 BBL					finish mixing Cement wash out P.L. & Release Plug
	1354	7 1/2						ST Disp w/ 44 BBL water + 56.6 BBL mud
	1410	3	100.6				1000	Plug Down
	1412							Release float held
	1413							DROP 4" opening Bomer.
	1425						800	open D.V. + Circ w/ mud 2 HRS
								finish Circ hook up to Cement
								Plug Rathole w/ 10 SKS SMD CMT w/ 10 SKS
	1640	5					200	ST 20 BBL Clay fix water
								mix 250 SKS SMD Cement 1/4 #/sk Floccle,
								1/4% D-AIR
	1710		138 BBL					finish mixing Cement
	1712	5						Release D.V. Closing Plug + ST DISP
	1720	3	55.4				1200	Plug Down Cement Dis. CUC to P.L. APPROX 25 SKS
	1730							Release D.V. held
	1800							Job Complete

RECEIVED

ISEP 07 2001

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