

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

API NO. 15- 205-25284-0000

County Wilson

NW NW/4 NE/4 Sec. 34 Twp. 29 Rge. 16  E

280 Feet from S (circle one) Line of Section

2,360 Feet from E (circle one) Line of Section

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

Lease Name Lula Well # G-1

Field Name unnamed

Producing Formation \_\_\_\_\_

Elevation: Ground \_\_\_\_\_ KB \_\_\_\_\_

Total Depth 565' PBDT \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 22' Feet

Multiple Stage Cementing Collar Used? \_\_\_\_\_ Yes  No

If yes, show depth set \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from \_\_\_\_\_

Set depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

Drilling Fluid Management Plan P+H RGR 8/13/07  
Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Watering method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

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

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

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

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

Operator: License # 32342

Name: Bill Gaskins

Address 6800 S 44th St

City/State/Zip Lincoln, NB 68516

Purchaser: \_\_\_\_\_

Operator Contact Person: Jim Morris

Phone (316) 625-2826

Contractor: Name: \_\_\_\_\_

License: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion  
 New Well \_\_\_\_\_ Re-Entry \_\_\_\_\_ Workover

Oil \_\_\_\_\_ SWD \_\_\_\_\_ SLOW \_\_\_\_\_ Abn  
 Gas \_\_\_\_\_ ENHR \_\_\_\_\_ SIGW \_\_\_\_\_  
 Dry \_\_\_\_\_ Other (Core, WSW, Expl., \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, etc)

If Workover:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

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

9/17/00 9/20/00 9/20/00  
Spud Date Date Reached TD Completion Date

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 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 Bill Gaskins

Title owner & operator Date 10-26-00

Subscribed and sworn to before me this 25th day of October, 2000

Notary Public Julia G. Rainforth

Date Commission Expires December 5, 2003

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)

GENERAL NOTARY-State of Nebraska  
JULIA G. RAINFORTH  
My Comm. Exp. Dec. 5, 2003

Operator Name Bill Gaskins Lease Name Lula Well # G-1  
 Sec. 34 Twp. 29 Rge. 16  East  West  
 County Wilson

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 (Attach Additional Sheets.)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
List All E.Logs Run:			

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	6 1/4"	22' of 7"					

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		N/A		
<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
		Portland Cement	565'
	N/A	w/6% Gel 95 sacks used	inside 6 1/2" hole
		Pulled out 1 1/4" topped off.	

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 \_\_\_\_\_

L+5 316-328-4451

Air Drilling  
Specialists  
Oil and Gas Wells



**MOKAT DRILLING**  
Office Phone: (316) 879-5377



P.O. Box 380  
Caney, KS 67339

Operator <b>HILL GASKINS</b>		Well No. <b>G-1</b>	Lease <b>Luia</b>	Loc <b>Loc</b>	% <b>%</b>	% <b>%</b>	% <b>%</b>	Sec. <b>34</b>	Twp. <b>29S</b>	Rge. <b>16E</b>		
County <b>WILSON</b>		State <b>KS</b>	Type/Well	Depth <b>560'</b>	Hours	Date Started <b>9-17-00</b>	Date Completed <b>9-20-00</b>					
Job No.	Casing Used <b>22" 7"</b>	Bit Record		Coring Record								
Driller <b>Tootie</b>	Cement Used	Bit No.	Type	Size	From	To	Slit No.	Type	Size	From	To	% Rec.
Driller	Rig No.											
Driller	Hammer No.											

From		To	Formation	From	To	Formation	From	To	Formation	From	To	Formation
0	10		overburden	410	430	lime						
10	16		lime (water)	438	440	sandy shale						
16	25		sandy shale	440	466	shale						
25	50		sandy lime	466	525	sandy shale						
50	70		sandy shale	525	590	lime						
70	72		coal	530	532	shale, or coal						
72	76		shale	532	560	lime						
76	120		sandy shale									
120	122		lime									
122	126		shale									
126	130		lime			T.D. 560'						
130	145		limey shale									
145	175		lime									
175	210		sandy lime									
210	220		blk shale									
220	225		lime									
225	228		sandy shale									
228	235		shale									
235	260		lime									
260	265		limey shale (gas)									
265	341		lime									
341	383		shale									
383	395		limey shale									
395	401		shale									
401	406		lime									
406	410		limey shale									

RECEIVED  
 STATE CORPORATION COMMISSION  
 OCT 27 2000  
 CONSERVATION DIVISION  
 Wichita Kansas

OCT-12-00 THU 02:28 PM  
 FROM : MOKAT DRILLING  
 PHONE NO. : 1 316 879 5751  
 FAX :  
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