FORM MUST BE TYPED

SIDE ONE

API NO. 15- 065-21,053-00-01

STATE CORPORATION COMMISSION OF KANSAS

OIL & GAS CONSERVATION DIVISION	
WELL COMPLETION FORM	County Graham
ACO-1 WELL HISTORY DESCRIPTION OF WELL AND LEASE	E 
Operator: License #5135	2310 Feet from S(N) (circle one) Line of Section
Name: John O. Farmer, Inc.	1650 Feet from E)W (circle one) Line of Section
Address P.O. Box 352	Footages Calculated from Nearest Outside Section Corner:
7101 BOX 33E	(NE), SE NW or SW (circle one)
City/State/Zip Russell, KS 67665	(Circle one)
	Lease Name Klenk Well # 3
Purchaser: Farmland Industries, Inc.	Field NameErnst Northwest
	XXXXXXXXX Formation Lansing "I"
Operator Contact Person: John O. Farmer III	(Injection)
Phone ( 913 ) 483-3144	Elevation: Ground 2376' KB 2381'
	Total Depth
Contractor: Name:	
License.	Amount of Surface Pipe Set and Cemented at Feet
Wellsite Geologist: None	
	Multiple Stage Cementing Collar Used? Yes No
Designate Type of Completion	If yes, show depth setFeet
New Well Re-Entry X Workover	
Oct our cont	If Alternate II completion, cement circulated from
Oil SWD SIOW Temp. Abd SIGW	feet depth to w/ sx cmt.
——————————————————————————————————————	a the state of the second of the second
Dry Other (Core, WSW, Expl., Cathodic, etc.)	Drilling Fluid Management Plan CONVERSION 9 9 12-28-95
If Workover/Re-Entry: old well info. as follows:	(Data must be collected from the Reserve Pit)
Operators John O. Ferman, Inc.	Chloride content
Operator: <u>John O. Farmer, Inc.</u> Well Name: Klenk #3 Producer	Chloride content ppm Fluid volume bbls
Comp. Date 10-8-78 Old Total Depth 3969	Dewatering method used
comp. vace 10 6 70 ota Total veptii 3707	Location of fluid disposal if hauled offsite:
Deepening Re-perf. X Conv. to (Inj)/SWD	Location of Itala disposal if flauted offsite:
Plug Back PBTD	Operator Name
Commingled Docket No. E-24,818	
Dual Completion Docket No	Lease Name License No
Other (SWD or Inj?) Docket No.	
	Quarter Sec Twp S Rng E/W
12-26-95 12-27-95	
Speed Date OF START Date Reached ID . Completion Date OF	County Docket No
OF WORKOVER WORKOVER	
	be filed with the Kansas Corporation Commission, 200 Colorado
Derby Building, Wichita, Kansas 67202, within 120 days of the	he 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 for	m (see rule 82-3-107 for confidentiality in excess of 12
	eport shall be atached 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 promule	gated to regulate the oil and gas industry have been fully complie
with and the statements herein are complete and correct to the	best of my knowledge
and complete and complete to the	The state of the s
1.00 £ 1 +tt	K.C.C. OFFICE USE ONLY
signature oh O. Juliu III	F Letter of Confidentiality Attached
	STATE D C Wireline Log Received
Title President Date 12-27-95	STATE CORPORATE CO. Geologist Report Received
Subscribed and sworn to before me this <u>27th</u> day of <u>December</u>	Distribution
19 <u>95</u> .	Dra OKEC / MSUD /Pen NCDA
M. La DIL	KGSSS/ON Plug Other
Notary Public Margaret W, fehicles	(Specify)
Margaret A. Schulte	Wind Way
Date Commission Expires	Sas Kansas Slung  Form ACO-1 (7-91)
MOTARY PUBLIC - State of Kan	isas   1997/SAS O Celly
MANGARET A SCHULTE	

MOTARY PUBLIC - State of Kansas

MARGARET A SCHULTE

My Appt. Exp. 1-27-97 My Appt. Exp. L

## Property of As A Domn

SIDE TWO

Operator Name	John O. Farmer	, Inc.	Lease Name	Klenk		Well #	#3
		ן East	S		0		
Sec. <u>18</u> Twp. <u>9S</u>	Rge. <u>23</u> L <sub>X</sub>	J East J West	County		Graham		
INSTRUCTIONS: Show i interval tested, time hydrostatic pressures if more space is need	tool open and cl	osed, flowing and sh perature, fluid reco	ut-in pressures	s, whether sh	ut-in pressure	reached st	tatic level,
Drill Stem Tests Take (Attach Additional		Yes X No		og Formati	on (Top), Dept	h and Datur	ns Sample
Samples Sent to Geolo	gical Survey	Yes X No	Name		То	p	Datum
Cores Taken		Yes X No					
Electric Log Run (Submit Copy.)		Yes X No					
List All E.Logs Run:							
		CASING RECOR	RD New	Used			
	Report all	strings_set-conduct	or, surface, i	ntermediate,	production, et	c	
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"	26#	2121	Common	170	
Production	7-7/8"	4-1/2"	10-1/2#	39621	50/50 Pozmix	150	10% salt, 2% gel
		ADDITIONAL CE	MENTING/SQUEEZI	E RECORD			
Purpose:	Depth			1			
Perforate	Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives			
X Protect Casing	Surface 2060'	HLC	325	10% Gilsonite, 1/4# Flocele			
Plug Back TD		<del></del>					
Plug Off Zone	 			† I			
		RECORD - Bridge Pl		•			t Squeeze Record
Shots Per Foot	3871-3875 (4	age of Each Interva	Perforated   (Amount and Kind of Material Used)   Depth   2000 gals. 15% NE   3871-75				
TUBING RECORD	Size -3/8" PVC lined	Set At 3544'	Packer At 3544'	Liner Run 	Yes ()	() No	
	ned Production, SI 12-27-95	D or Inj. Prod	ucing Method _	∃ Flowing □	Pumping []	Gas Lift <sup>L</sup> X	(Injection) Other (Explain)
Estimated (Injection   Per 24 Hours	n) Oil	Bbls. Gas	Mcf W	ater Bbl 300 BWPD	s. Gas	s-Oil Ratio	Gravity
Disposition of Gas:		ME	THOD OF COMPLET	ION		Injection	Production Interv
Vented Sold		Open Ho	le X Perf.	Dually Comp	c. Comming	lėd	3871-75!
(If vented, sul	OMIT ACU-TO.)	Other (	Specify)				