

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISION

Form ACO-1
September 1999
Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Operator: License # 8462
Name: Loren Smith
Address: 5501 NW 124 Tre
City/State/Zip: Oswego Kansas 67356
Purchaser: Plain All American Inc
Operator Contact Person: Loren Smith
Phone: (620) 827 6264
Contractor Name: Doug Mc Gown Box 299
Mounds Ks 66056
License: 5786
Wellsite Geologist: Loren Smith
Designate Type of Completion:
 New Well Re-Entry Workover
 Oil SWD SLOW 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. _____
 2-11-2001 2-12-2001 2-2001
Spud Date or Date Reached TD Completion Date or
Recompletion Date Recompletion Date

API No. 15 - 099 23135 0000
County: Labette
\$ W - SE SE Sec. 8 Twp. 32 S. R. 21 East West
511 FSL feet from XX (circle one) Line of Section
1150 FEL feet from XX (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Czaphansky Well #: 10
Field Name: UN
Producing Formation: Bartlesville
Elevation: Ground: 835 Kelly Bushing: 3 FT
Total Depth: 327 Plug Back Total Depth: _____
Amount of Surface Pipe Set and Cemented at 21 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from _____
feet depth to 307 (T) P w/ 22 sx cmt.
Drilling Fluid Management Plan AAA KGR 1/8/08
(It 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. R. _____ East West
County: _____ Docket No.: _____

RECEIVED
KANSAS CORPORATION COMMISSION
MAY 4 2001

CONSERVATION DIVISION

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: Loren Smith
Title: Owner Date: 5-2-2001
Subscribed and sworn to before me this 2 day of May
2001
Notary Public: Ann Beesley
Date Commission Expires: 9-1-2002

KCC Office Use ONLY
 Letter of Confidentiality Attached
If Denied, Yes Date: _____
 Wireline Log Received
 Geologist Report Received
IC Distribution

ANN BEESLEY
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 9-1-2002

X

Operator Name: Loren Smith Lease Name: Czaphansky Well #: 10
 Sec. 8 Twp. 32 S. R. 21 East West County: Labette

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.

<p>Drill Stem Tests Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Attach Additional Sheets)</p> <p>Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Electric Log Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Submit Copy)</p> <p>List All E. Logs Run: _____</p>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> Log</td> <td>Formation (Top), Depth and Datum</td> <td><input type="checkbox"/> Sample</td> </tr> <tr> <td>Name</td> <td>Top</td> <td>Datum</td> </tr> <tr> <td>Black CLAY</td> <td>5</td> <td>6</td> </tr> <tr> <td>Lime Rock</td> <td>6</td> <td>22</td> </tr> <tr> <td>Black Shell</td> <td>6</td> <td>24</td> </tr> <tr> <td>Lime Rock</td> <td>18</td> <td>42</td> </tr> <tr> <td>Dark Shell</td> <td>42</td> <td>82</td> </tr> <tr> <td>Sandy Shell</td> <td>60</td> <td>142</td> </tr> <tr> <td>Grey Shell</td> <td>80</td> <td>222</td> </tr> <tr> <td>Sandy Shell</td> <td>60</td> <td>282</td> </tr> <tr> <td>Light Sandy</td> <td>18</td> <td>300</td> </tr> <tr> <td>Oil Sand</td> <td>18</td> <td>318</td> </tr> <tr> <td>Oil TD⁹</td> <td></td> <td>327</td> </tr> </table>	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample	Name	Top	Datum	Black CLAY	5	6	Lime Rock	6	22	Black Shell	6	24	Lime Rock	18	42	Dark Shell	42	82	Sandy Shell	60	142	Grey Shell	80	222	Sandy Shell	60	282	Light Sandy	18	300	Oil Sand	18	318	Oil TD ⁹		327
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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	# Sacs Used	Type and Percent Additives
Oil	9 6.25 Inch	7 Inch	71	21	Monarch	22	None

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. Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)		Depth

TUBING RECORD - Size <u>2 (7 (8</u> Set At <u>311</u> Packer At <u>311</u>		Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Date of First, Resumed Production, SWD or Enhr.		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	<u>01</u>) <u>8</u> Bbbs.	Gas Mcf	Water Bbbs. <u>UN</u> Gas-Oil Ratio <u>29</u> Gravity

Disposition of Gas Vented Sold Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval _____

