

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM  
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 6772  
Name V. FRANCIS WEIGEL  
Address BOX 244  
GORHAM KANSAS 67640  
City/State/Zip .....

Purchaser Inland Crude  
Purchasing Corporation

Operator Contact Person V. Francis Weigel  
Phone 913-637-5883

Contractor: License # 5655  
Name Shields Drilling Co. Inc.

Wellsite Geologist F. C. Whisler  
Phone 913-483-3020

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  Temp Abd  
 Gas  Inj  Delayed Comp.  
 Dry  Other (Core, Water Supply etc.)

If OWWO: old well info as follows:  
Operator .....  
Well Name .....  
Comp. Date ..... Old Total Depth.....

WELL HISTORY

Drilling Method:  
 Mud Rotary  Air Rotary  Cable

July 5, 1980 July 14, 1980 Aug 27, 1980  
Spud Date Date Reached TD Completion Date  
3540 3489  
Total Depth PBDT

Amount of Surface Pipe Set and Cemented at 1085 feet.  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set.....feet  
If alternate 2 completion, cement circulated  
from.....feet depth to.....w/.....SX cmt

API NO. 15-051-22-035-00-00

County ELLIS

SE SW SW Sec. 5 Twp. 11 Rge. 16  East  West

330 Ft North from Southeast Corner of Section  
4290 Ft West from Southeast Corner of Section

(Note: Locate well in section plat below)

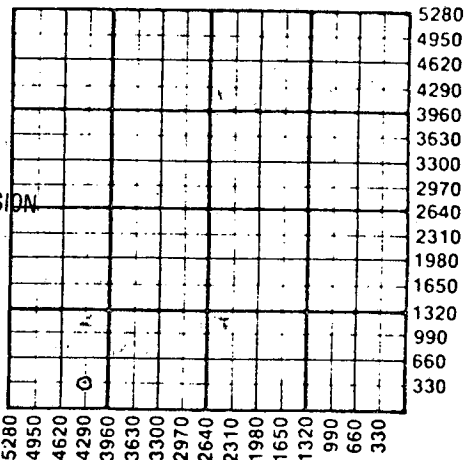
Lease Name CHESNEY B Well # 3

Field Name LIEB

Producing Formation LANSING

Elevation: Ground 1896 KB 1901

Section Plat



RECEIVED  
STATE CORPORATION COMMISSION  
2-8-1985  
FEB 08 1985  
CONSERVATION DIVISION  
Wichita, Kansas

WATER SUPPLY INFORMATION

Disposition of Produced Water:  Disposal  Repressuring  
Docket # Revised  
Applied For

Questions on this portion of the ACO-1 call:

Water Resources Board--(913) 296-3717

Source of Water:  
Division of Water Resources Permit #.....

Groundwater.....Ft North from Southeast Corner  
(Well) .....Ft West from Southeast Corner of  
Sec Twp Rge  East  West

Surface Water.....Ft North from Southeast Corner  
(Stream, pond etc).....Ft West from Southeast Corner  
Sec Twp Rge  East  West

Other (explain).....  
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. 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 V. Francis Weigel

Title Owner - operator Date .....

Subscribed and sworn to before me this 6 day of February 1986.

Notary Public Joan Weigel

Date Commission Expires 1-19-89

Joan Weigel  
NOTARY PUBLIC  
State of Kansas  
MY APPT. EXPIRES 1-19-89

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Drillers Timelog Received  
Distribution  
 KCC  SWD/Rep.  NGPA  
 KGS  Plug  Other  
(Specify)

Sec. 5 Twp. 11 Rge. 16 W

Operator Name V. FRANCIS WEIGEL Lease Name CHESNEY B Well # 3

Sec. 5 Twp. 11 Rge. 16  East  West County ELLIS

WELL LOG

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 <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Formation Description <input checked="" type="checkbox"/> Log <input type="checkbox"/> Sample
Samples Sent to Geological Survey <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
DST #2: 3115-3155: 15-60-60-60 Fair blow Rec. 200' MW IFP: 48-78 IBHP: 730 FFP: 97-126 FBHP: 536	Name: Anhydrite Top: 1075 Bottom: 1118
DST #1: 2835-55: 15-45-45-45 wk B10 Rec. 70' MUD show of heavy blk oil IFP: 48-48 IBHP: 1070 FFP: 58-68 FBHP: 1021	Name: Topeka Top: 2814
DST #3: 3160-90: 10-45-45-45 STRONG B10 Rec. 670' SGC FOS WTR IFP: 78-175 IBHP: 410 FFP: 234-361 FBHP: 390	Name: Heebnor Top: 3048
DST #4: 3190-3211: 45-45 weak blow Rec. 20' MUD IFP: 48-48 BHP: 565	Name: Toronto Top: 3070
DST #5: 3310-35: 30-60-60-60 wk blow Rec. 63' MGD IFP: 24-24 IBHP: 397 FFP: 33-41 FBHP: 380	Name: Lansing Top: 3092
	Name: Base KC Top: 3336 Bottom: 3336
	Name: Conglomerate Top: 3379
	Name: Simpson Top: 3462
	Name: Arbuckle Top: 3504
	Name: T.D. Top: 3540

CASING RECORD <input checked="" 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	12 1/4"	8 5/8"	24#	1085'	Quickset	425	NA
Production	7 7/8"	5 1/2"	14#	3538'	Common	185	10% Salt

PERFORATION RECORD		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	
Shots Per Foot	Specify Footage of Each Interval Perforated	Amount and Kind of Material Used	Depth
2	3331-34 F 3326-29	Acid 3000 gals. 15% HCL	

TUBING RECORD	Size	Set At	Packer at	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 7/8	3480'	None		

Date of First Production	Producing Method
Sept. 1980	<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
	5		40		

METHOD OF COMPLETION

Production Interval

Disposition of gas: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease	<input type="checkbox"/> Open Hole <input checked="" type="checkbox"/> Perforation <input type="checkbox"/> Other (Specify) .....	3326
	<input type="checkbox"/> Dually Completed <input type="checkbox"/> Commingled	3334