

ORIGINAL

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

Operator: License # 5786
Name: McGown Drilling, Inc.
Address: P.O. Box 299
City/State/Zip: Mound City, KS 66056
Purchaser: _____
Operator Contact Person: Doug McGown
Phone: (913) 795-2258
Contractor: Name: McGown Drilling, Inc.
License: 5786
Wellsite Geologist: _____

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. _____

8-10-04	8-10-04	8-10-04
Spud Date or	Date Reached TD	Completion Date or
Recompletion Date		Recompletion Date

API No. 15 - 011-23000-00-00
County: Bourbon
NW NW NW Sec. 8 Twp. 24 S. R. 25 ☒ East ☐ West
330 feet from S (N) (circle one) Line of Section
330 feet from E (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW
Lease Name: Beth Well #: 4-8

Field Name: _____
Producing Formation: Burgess

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: 447 Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at 20 Feet

Multiple Stage Cementing Collar Used? ☐ Yes ☒ No

If yes, show depth set _____ Feet

If Alternate II completion, cement circulated from 432

feet depth to surface w/ 45 sx cmt.

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)

Chloride content _____ ppm Fluid volume _____ bbls

Dewatering 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.: _____

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: [Signature]

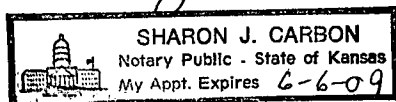
Title: President Date: 3-21-06

Subscribed and sworn to before me this 21 day of March

2006

Notary Public: [Signature]

Date Commission Expires: June 6, 2009



KCC Office Use ONLY

Letter of Confidentiality Received

If Denied, Yes ☐ Date: _____

Wireline Log Received

Geologist Report Received

UIC Distribution

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BETH

#4-8

DEPTH

FORMATION

0-4'	Topsoil
4-12'	Lime
12-15'	Shale
15-21'	Lime
21-62'	Shale
62-82'	Lime
82-90'	Shale
90-93'	Lime
93-184'	Shale
184-186'	Lime
186-212'	Shale
212-214'	Coal
214-272'	Shale
272-274'	Sand
274-294'	Shale
294-302'	Sand
302-355'	Shale
355-390'	Sand
390-391'	Coal
391-419'	Shale
419-420'	Coal
420-435'	Shale
435-438'	Sand
438-440'	Coal
440-447'	Shale
447'	TD

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Side Two

Operator Name: McGown Drilling, Inc. Lease Name: Beth Well #: 4-8
 Sec. 8 Twp. 24 S. R. 25 ☒ East ☐ West County: Bourbon

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:

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

Name Top Datum
 *See Attached Sheet

CASING RECORD <input type="checkbox"/> New <input checked="" 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	8 3/4	6 1/2	8	20'	Portland	5	none
Long String	6 1/8	2 3/8	4.5	432	Portland	45	none

ADDITIONAL CEMENTING / SQUEEZE RECORD

Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ 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	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input 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	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas METHOD OF COMPLETION

Production Interval

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

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

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