

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

ORIGINAL

Operator: License # 33491  
Name: KING OIL OPERATIONS  
Address: 696 D FAIRGROUNG ROAD  
City/State/Zip: ELLIS KS 67637  
Purchaser: \_\_\_\_\_  
Operator Contact Person: RODNEY KING  
Phone: (785) 726-3498  
Contractor: Name: ANDERSON DRILLING  
License: 33237  
Wellsite Geologist: \_\_\_\_\_

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. \_\_\_\_\_

<u>12-09-04</u>	<u>12-17-04</u>	<u>12-17-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25373-00-00  
County: ELLIS  
NW NE NW SE Sec. 17 Twp. 11 S. R. 20  East  West  
2409 feet from (S) N (circle one) Line of Section  
1805 feet from (E) W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW SW  
Lease Name: KING Well #: 150 /  
Field Name: WILDCAT

Producing Formation: \_\_\_\_\_  
Elevation: Ground: 2120 Kelly Bushing: \_\_\_\_\_  
Total Depth: 3746 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 233 Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
If Alternate II completion, cement circulated from \_\_\_\_\_  
feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cmt.

**Drilling Fluid Management Plan** *P+ A KGR 3/5/08*  
(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: Rodney L. King  
Title: Operator Date: 3-14-05  
Subscribed and sworn to before me this 14<sup>th</sup> day of March,  
2005.  
Notary Public: Rita A. Anderson  
Date Commission Expires: January 21, 2008

**KCC Office Use ONLY**  
NO Letter of Confidentiality Received  
If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution  
**RECEIVED**  
**MAR 17 2005**

NOTARY PUBLIC  
STATE OF KANSAS  
RITA A. ANDERSON  
NOTARY PUBLIC  
STATE OF KANSAS  
My App. Exp. 1-21-08

KCC WICHITA

Operator Name: KING OIL OPERATIONS Lease Name: KING Well #: 1  
 Sec. 17 Twp. 11 S. R. 20  East  West County: ELLIS

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cones. 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 <i>(Attach Additional Sheets)</i>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cones Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	1563	+ 562
Electric Log Run <i>(Submit Copy)</i>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Topeka	3168	-1063
List All E. Logs Run:		Heebner	3385	-1260
		Toronto	3406	-1281
		Lansing-Kansas City	3423	-1298
		Base-kansas City	3650	-1525
		Arbuckle	3717	-1592

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"	25	233	COM	150'	3% CC @% GEL

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 TID				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORMANCE 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	Packet At	Winer Run: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Ehm.		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:  Ventured  Sold  Used on Lease *(If ventured, Submit ACC-18.)*

METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  Other (Specify) \_\_\_\_\_

Production Interval: \_\_\_\_\_

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 MAR 17 2005  
 KCC WICHITA



CHARGE TO: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

TICKET  
 No 74  
 PAGE 1 OF 1

RECEIVED  
 MAR 17 2005

SERVICE LOCATIONS 1. _____	WELL/PROJECT NO. 51	LEASE	COUNTY/PARISH Lin	STATE K	CITY KCC WICHITA	DATE 12-17-04	OWNER
2. _____	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR	RIG NAME/NO. A: A 04	SHIPPED VIA	DELIVERED TO	ORDER NO.	
3. _____	WELL TYPE D1	WELL CATEGORY	JOB PURPOSE P.T.A.	WELL PERMIT NO. 12-051-25373000	WELL LOCATION 175, 117, 202		
4. _____	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF							
725					MILEAGE		40			3.00	
748					Log Service		1			550.00	
					Tool Plug		1		898	70.00	
					50-10 6X 801		2.5			6.60	
					Flange		7			1.00	
					Stucco Charge CONT		2.5			1.10	
					Drillage		338.75			1.90	

**LEGAL TERMS:** Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, **PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY** provisions.

MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X \_\_\_\_\_  
 DATE SIGNED: 12-17-04

TIME SIGNED: 1:00  
 A.M.  
 P.M.

**REMIT PAYMENT TO:**  
 SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
WE UNDERSTOOD AND MET YOUR NEEDS?			
OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?			
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND			

PAGE TOTAL	2
TAX	
TOTAL	

**ORIGINAL**

CUSTOMER K.O.D.	WELL NO. #1	LEASE K.O.	JOB TYPE J-7A	TICKET NO. 7480
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CHART NO.	TIME	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS
				T	C	TUBING	CASING	
	1400							Direction, Sit-up, Dec in Top, ... Holding @ 374#
			40					61.7 @ 3717'
	1600		3		✓		150	H <sub>2</sub> O
			7		✓		150	CMT 255Ks
			1		✓		150	H <sub>2</sub> O
			19					M <sub>2</sub> O
	1645	4	9		✓		100	3rd Aug @ 820' - H <sub>2</sub> O
			24		✓		100	CMT 100Ks
			3		✓		100	H <sub>2</sub> O
								Put D <sub>2</sub>
								7' Plu @ 820'
	1700				✓		100	H <sub>2</sub> O
			10		✓		100	CMT 40Ks
			1		✓		100	H <sub>2</sub> O
								Put D <sub>2</sub> cut
								2nd Plu
	1750		3		✓		50	Plu <sup>KAT</sup> @ 400' 100Ks
	1800	2	3				0	Plug 40' @ 1/2 Plu 15Ks
	1900							Wait on
	1900							M <sub>2</sub> O
	1900							Subsampler
								Transducer
								1st Plu next on #

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**MAR 17 2005**  
**KCC WICHITA**



CHARGE TO: King Oil Company  
 ADDRESS: \_\_\_\_\_  
 CITY, STATE, ZIP CODE: \_\_\_\_\_

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 MAR 17 2005  
 KCC WICHITA

TICKET 12 745  
 PAGE 1 OF 1

1. <u>Hayes, KS</u>	WELL/PROJECT NO. <u>12-704</u>	LEASE <u>King</u>	COUNTY/PARISH <u>Ellis</u>	STATE <u>KS</u>	CITY	DATE <u>12-7-04</u>	OWNER <u>Sw...</u>
2. <u>Ness City, KS</u>	TICKET TYPE <input type="checkbox"/> SERVICE <input type="checkbox"/> SALES	CONTRACTOR <u>JA</u>	RIG NAME/NO.	SHIPPED VIA <u>Truck</u>	DELIVERED TO	ORDER NO.	
3.	WELL TYPE <u>oil</u>	WELL CATEGORY <u>Development</u>	JOB PURPOSE <u>Commuter Service</u>	WELL PERMIT NO.	WELL LOCATION		
4.	REFERRAL LOCATION	INVOICE INSTRUCTIONS					

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			DESCRIPTION	QTY.		U/M		UNIT PRICE	AMOUNT
		LOC	ACCT	DF		QTY.	U/M				
575		1			MILEAGE	30	mi			3	70
5763		1			purchase charge - Shallow Surface	1	sq ft	235	ft	550	550
410		1			Top plug	1	sq ft	88	in	70	70
325		2			Standard Cement	150	skt			7	1125
279		2			Beatonite gel	3	skt			12	36
278		2			Calcium Chloride	4	skt			35	140
581		2			Cement Service Charge	150	skt			1	165
583		2			Drayage	200.8	sq ft				198

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MUST BE SIGNED BY CUSTOMER OR CUSTOMER'S AGENT PRIOR TO START OF WORK OR DELIVERY OF GOODS

X [Signature]  
 DATE SIGNED 12-10-04 TIME SIGNED 02:30  
 A.M.  P.M.

REMIT PAYMENT TO:

SWIFT SERVICES, INC.  
 P.O. BOX 466  
 NESS CITY, KS 67560  
 785-798-2300

SURVEY	AGREE	UN-DECIDED	DIS-AGREE	PAGE TOTAL	ORIGINAL
OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?				2379	
WE UNDERSTOOD AND MET YOUR NEEDS?					
OUR SERVICE WAS PERFORMED WITHOUT DELAY?					
WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?				TAX	
ARE YOU SATISFIED WITH OUR SERVICE?	<input type="checkbox"/> YES <input type="checkbox"/> NO			TOTAL	
<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND					

CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES The customer hereby acknowledges receipt of the materials and services listed on this ticket.

SWIFT OPERATOR Nick K... APPROVAL \_\_\_\_\_

The

