

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 # 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 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. _____
09-14-00 09-14-00 09-14-00
Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 099-231190000
County: Labette
NE 174 Sec. 10 Twp. 35 S. R. 21 East West
858 feet from S N (circle one) Line of Section
2442 feet from E W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
(circle one) NE SE NW SW
Lease Name: Barr Well #: P5
Field Name: Chetopa
Producing Formation: Bartlesville
Elevation: Ground: _____ Kelly Bushing: _____
Total Depth: 132' Plug Back Total Depth: Surface
Amount of Surface Pipe Set and Cemented at 0 Feet
Multiple Stage Cementing Collar Used? Yes No
If yes, show depth set _____ Feet
If Alternate II completion, cement circulated from TD
feet depth to Surface w/ 12 ^{sq cmt.}
PA-Dig-2/27/09

Drilling Fluid Management Plan
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
De-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.: _____

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 of 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: 01-02-01
Subscribed and sworn to before me this 2nd day of January, 2001.
Notary Public: Mary E. Leisure
Date Commission Expires: 4-21-03

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

CONSERVATION DIVISION
 WICHITA, KANSAS
 JAN 04 2001

