

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

**ORIGINAL**

Form ACO-1  
September 1999  
Form Must Be Typed

**WELL COMPLETION FORM**  
**WELL HISTORY - DESCRIPTION OF WELL & LEASE**

Operator: License # 33269  
Name: CENTRAL OPERATING, INC  
Address: 1600 BROADWAY, SUITE 1050  
City/State/Zip: DENVER CO 80202  
Purchaser: \_\_\_\_\_  
Operator Contact Person: P.A. BREW  
Phone: ( 303 ) 894-9576  
Contractor: Name: ANDERSON DRILLING  
License: 33237  
Wellsite Geologist: JERRY GREEN

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. \_\_\_\_\_

<u>10-26-04</u>	<u>11-01-04</u>	<u>11-01-04</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 051-25341-00-00  
County: ELLIS  
N/2 S/2 NW NW Sec. 15 Twp. 12 S. R. 18  East  West  
850 feet from S / (N) (circle one) Line of Section  
660 feet from E / (W) (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
(circle one): NE SE (NW) SW  
Lease Name: LUECKE Well #: 15-1  
Field Name: BEMIS SHUTTS

Producing Formation: \_\_\_\_\_  
Elevation: Ground: 2190' Kelly Bushing: \_\_\_\_\_  
Total Depth: 3825' Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 201' w/ 150 sxs 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/ \_\_\_\_\_ sxs cmt.

**Drilling Fluid Management Plan**  
(Data must be collected from the Reserve Pit) *P+A KJR 2/21/08*  
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: Central Operating Inc.  
Title: President Date: Nov 18 2004  
Subscribed and sworn to before me this 11<sup>th</sup> day of November  
2004  
Notary Public: [Signature]  
Date Commission Expires: May 28/2007

**KCC Office Use ONLY**

Letter of Confidentiality Received  
 Denied, Yes  No Date: \_\_\_\_\_  
 Wireline Log Received  
 Geologist Report Received  
 UIC Distribution

**RECEIVED**  
**NOV 29 2004**  
**KCC WICHITA**

Operator Name: CENTRAL OPERATING, INC Lease Name: LUECKE Well #: 15-1  
 Sec. 15 Twp. 12 S. R. 18  East  West County: ELLIS

**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 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>(Attach Additional Sheets)</i>  Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No  Cores Taken <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Submit Copy)</i>  List All E. Logs Run:	<input checked="" type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample  <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Name</th> <th style="text-align: right;">Top</th> <th style="text-align: right;">Datum</th> </tr> </thead> <tbody> <tr> <td>Topeka</td> <td style="text-align: right;">3170</td> <td style="text-align: right;">-967</td> </tr> <tr> <td>Heebner</td> <td style="text-align: right;">3428</td> <td style="text-align: right;">-1225</td> </tr> <tr> <td>LKC</td> <td style="text-align: right;">3476</td> <td style="text-align: right;">-1273</td> </tr> <tr> <td>BKC</td> <td style="text-align: right;">3720</td> <td style="text-align: right;">-1517</td> </tr> <tr> <td>Arbuckle</td> <td style="text-align: right;">3808</td> <td style="text-align: right;">-1605</td> </tr> <tr> <td>RTD</td> <td style="text-align: right;">3823</td> <td style="text-align: right;">-1619</td> </tr> </tbody> </table>	Name	Top	Datum	Topeka	3170	-967	Heebner	3428	-1225	LKC	3476	-1273	BKC	3720	-1517	Arbuckle	3808	-1605	RTD	3823	-1619
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RTD	3823	-1619																				

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	# Sacks Used	Type and Percent Additives
<b>SURFACE</b>	12 1/4"	8 5/8"		206	COM	150	3% CC 2% 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 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 <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumerd 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 <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____
Production Interval _____	

RECEIVED  
 NOV 29 2004  
 KCC WICHITA

DRILLER'S WELL LOG

CENTRAL OPERATING, INC  
Luecke 15-1  
NW/4 15-12S-18W  
Ellis Co., KS

Spud Date: Oct 26, 2004  
Complete Date: Nov 1, 2004

Elevation: 2190' G.L

DEPTH

0 - 213 Sand & Shale  
213 - 1476 Shale & Sand  
1476 - 1513 Anhydrite  
1513 - 1756 Shale & Sand  
1756 - 2407 Shale  
2407 - 2945 Shale  
2945 - 3115 Shale & Lime  
3115 - 3265 Shale  
3265 - 3420 Shale & Lime  
3420 - 3800 Lime  
3800 - 3825 Shale - Lime  
3825 R.T.D.

Surface Pipe: Set 201 feet of 8 5/8" casing @ 206 feet  
With 150 sacks of COM 3% CC; 2% Gel


STATE OF KANSAS     )  
                                  ) ss:  
COUNTY OF GRAHAM)

Andy Anderson of lawful age, does swear and states that the facts and statements herein are true and correct to the best of his knowledge.

  
Andy Anderson

Subscribed and sworn to before me this 5<sup>th</sup> day of November, 2004

My commission expires:  
January 21, 2008

  
Rita A. Anderson



RECEIVED  
NOV 29 2004  
KCC WICHITA

# ALLIED CEMENTING CO., INC. 18842

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT: R

DATE <u>11.1.04</u>	SEC.	TWP.	RANGE	CALLED OUT	ON LOCATION	JOB START <u>10:30 AM</u>	JOB FINISH <u>2:30 PM</u>
LEASE <u>Lucky</u>	WELL # <u>1</u>	LOCATION <u>Hays BN E-5</u>			COUNTY <u>Ellis</u>	STATE <u>K</u>	
OLD OR <del>NEW</del> (Circle one)							

CONTRACTOR A & A Dily

TYPE OF JOB Plug

HOLE SIZE 7 7/8 T.D. 3825

CASING SIZE 5 1/2 DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX MINIMUM

MEAS. LINE SHOE JOINT

CEMENT LEFT IN CSG.

PERFS.

DISPLACEMENT

OWNER

CEMENT

AMOUNT ORDERED 215 60% 6 7/8 gel  
1/4 lb flow seal pack

COMMON	<u>129</u>	@	<u>7 85</u>	<u>1012 65</u>
POZMIX	<u>86</u>	@	<u>4 10</u>	<u>352 60</u>
GEL	<u>13</u>	@	<u>11 00</u>	<u>143 00</u>
CHLORIDE		@		
ASC		@		
<u>Flow-Seal</u>	<u>54</u>	@	<u>1 40</u>	<u>75 60</u>
<b>RECEIVED</b>				
<b>NOV 29 2004</b>				
<b>KCC WICHITA</b>				
HANDLING	<u>228</u>	@	<u>1 35</u>	<u>307 80</u>
MILEAGE	<u>51/5K/MILE</u>			<u>376 20</u>
				<b>TOTAL <u>2267 80</u></b>

**EQUIPMENT**

345 Dave

PUMP TRUCK CEMENTER Steve

# HELPER

BULK TRUCK

# DRIVER

BULK TRUCK

# 362 DRIVER Rufus

**REMARKS:**

25 @ 3788

25 @ 1495

100 @ 840

40 @ 256

10 @ 40 w/o plug

15 Rat hole

**SERVICE**

DEPTH OF JOB			
PUMP TRUCK CHARGE			<u>700 00</u>
EXTRA FOOTAGE		@	
MILEAGE	<u>33</u>	@	<u>4 00</u>
MANIFOLD		@	
<u>Dr Dry Hole</u>		@	<u>23 00</u>
<b>TOTAL <u>855 00</u></b>			

CHARGE TO: Central Operating

STREET \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLUG & FLOAT EQUIPMENT**

_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
_____	@	_____
<b>TOTAL _____</b>		

To Allied Cementing Co., Inc.  
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_

TOTAL CHARGE \_\_\_\_\_

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE [Signature]

PRINTED NAME

# ALLIED CEMENTING CO., INC. 18920

REMIT TO P.O. BOX 31  
RUSSELL, KANSAS 67665

SERVICE POINT:

Russell

DATE <u>10-26-04</u>	SEC. <u>15</u>	TWP. <u>12</u>	RANGE <u>18</u>	CALLED OUT <u>5:30PM</u>	ON LOCATION <u>7:30PM</u>	JOB START <u>7:40PM</u>	JOB FINISH <u>8:00PM</u>
LEASE <u>Luecke</u>		WELL# <u>15-1</u>	LOCATION <u>MAY'S ON 1/4 E 15.</u>		COUNTY <u>ELLIS</u>	STATE <u>KANSAS</u>	
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR A & A DRLLG. RIG 1 OWNER \_\_\_\_\_

TYPE OF JOB SURFACE

HOLE SIZE 12 1/4 T.D. 213'

CASING SIZE 8 5/8 DEPTH 212'

TUBING SIZE \_\_\_\_\_ DEPTH \_\_\_\_\_

DRILL PIPE \_\_\_\_\_ DEPTH \_\_\_\_\_

TOOL \_\_\_\_\_ DEPTH \_\_\_\_\_

PRES. MAX \_\_\_\_\_ MINIMUM \_\_\_\_\_

MEAS. LINE \_\_\_\_\_ SHOE JOINT \_\_\_\_\_

CEMENT LEFT IN CSG. 15

PERFS. \_\_\_\_\_

DISPLACEMENT 12 1/2 / BBL

EQUIPMENT

PUMP TRUCK # 360 CEMENTER GREEN HELPER PAUL

BULK TRUCK # 213 DRIVER GARY

BULK TRUCK # \_\_\_\_\_ DRIVER \_\_\_\_\_

REMARKS:

Demat CIRCULATE

THANK'S

CHARGE TO CENTRAL OPERATING INC.

STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

CEMENT AMOUNT ORDERED 150 SK Com

3% CC 2% gel

COMMON \_\_\_\_\_ @ \_\_\_\_\_

POZMIX \_\_\_\_\_ @ \_\_\_\_\_

GEL \_\_\_\_\_ @ \_\_\_\_\_

CHLORIDE \_\_\_\_\_ @ \_\_\_\_\_

ASC \_\_\_\_\_ @ \_\_\_\_\_

HANDLING \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

SERVICE

DEPTH OF JOB \_\_\_\_\_

PUMP TRUCK CHARGE \_\_\_\_\_

EXTRA FOOTAGE \_\_\_\_\_ @ \_\_\_\_\_

MILEAGE \_\_\_\_\_ @ \_\_\_\_\_

MANIFOLD \_\_\_\_\_ @ \_\_\_\_\_

8 5/8 WOODEN \_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

PLUG & FLOAT EQUIPMENT

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

\_\_\_\_\_ @ \_\_\_\_\_

TOTAL \_\_\_\_\_

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TAX \_\_\_\_\_

TOTAL CHARGE Debra

DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE \_\_\_\_\_

PRINTED NAME