

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE

ORIGINAL

API NO. 15-193-20,515-00-01

Operator: License # 30075

Name: Shamrock Resources, Inc.

Address 155 N. Market, Suite 950

City/State/Zip Wichita, KS 67202

Purchaser: NA

Operator Contact Person: Pat Deenihan

Phone (316) 262-7106

Contractor: Name: Cheyenne Well Service

License: 6454

Wellsite Geologist: David W. Clothier

Designate Type of Completion  
 New Well  Re-Entry  Workover

Oil  SWD  S10W  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:

Operator: David W. Clothier

Well Name: Howard Trust #1-26

Comp. Date 05-01-90 Old Total Depth 4700

Deepening  Re-perf.  Conv. to Inj/SWD  
 Plug Back  PBT  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_

10-9-91 10-14-91  
Spud Date Date Reached TD Completion Date

County Thomas

N/2 - SE - NE - Sec. 26 Twp. 9S Rge. 32 33 X W

3630 Feet from S/XX(circle one) Line of Section

660 Feet from E/XX(circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)

Lease Name Howard Trust Well # 1-26 WIW

Field Name Wildcat

Producing Formation Injection Well

Elevation: Ground 3043 KB 3048

Total Depth 4700 PBT 4601

Amount of Surface Pipe Set and Cemented at 316 Feet

Multiple Stage Cementing Collar Used?  Yes  No

If yes, show depth set 2624 Feet

If Alternate II completion, cement circulated from 2624

feet depth to surface w/ 1135 sx cmt.

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

Chloride content NA ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name \_\_\_\_\_

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 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 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 [Handwritten Signature]

Title Agent Date 11/15/91

Subscribed and sworn to before me this 11 day of November 19 91.

Notary Public Suzanne M. Montgomery

Date Commission Expires 9-15-93

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Received  
C  Geologic Report Received  
KANSAS CORPORATION COMMISSION  
Distribution  
KCC  SWD/Rep \_\_\_\_\_ NGPA \_\_\_\_\_  
DEC 20 1991 Plug \_\_\_\_\_ Other \_\_\_\_\_  
(Specify)  
12-20-1991

Suzanne M. Montgomery  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. \_\_\_\_\_

CONSERVATION DIVISION  
WICHITA, KS  
Form ACO-1 (7-91)

91

Operator Name Shamrock Resources, Inc. Lease Name Howard Trust Well # 1-26 WIW

Sec. 26 Twp. 9S Rge. 33  
 East  
 West

County Thomas

**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  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

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

ADDITIONAL CEMENTING/SQUEEZE RECORD					
Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

<b>TUBING RECORD</b>	Size <u>2 3/8" Lined</u>	Set At <u>4230</u>	Packer At <u>4230</u>	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. <u>10-15-91</u>	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:  Vented  Sold  Used on Lease  
 (If vented, submit ACO-18.)

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

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