

KANSAS CORPORATION COMMISSION OIL & GAS CONSERVATION DIVISION

Form ACO-1 October 2008 Form Must Be Typed

ORIGINAL

WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # 34002	API No. 15 - 039-21088-00-00
Name: Kinder Morgan Interstate Gas Transmission	
Address 1: 145 N. Country Club Drive	NE SE NE NW o 121 - 4 o p 27 DE JULIA
Address 2:	705
City: Colby State: KS Zip: 67701 +	
Contact Person: Mark Bredemeier	
Phone: (785) 462-6815 ext. 223 - Cell - 785-443-12	
CONTRACTOR: License # 554 - KDHE NTR. NELL	
Name: Woofter Pump And Well	DYD #66 1
Wellsite Geologist: NA REC	
Purchaser: NA	Producing Formation: NA
Designate Type of Completion:	0 6 2009 Elevation: Ground: 2588 Kelly Bushing: NA
	2/ D. J
oil swp slow	Total Depth: 300' Plug Back Total Depth: 3 Balow Grand Level Amount of Surface Pipe Set and Cemented at: 20' Feet
Gas ENHR SIGW	Multiple Stage Cementing Collar Used? ☐ Yes ☑ No
CM (Coal Bed Methane) Temp. Abd.	If yes, show depth set:Feet
Dry Other Cathodic Borehole	If Alternate II completion, cement circulated from:
(Core, WSW, Expl., Cathodic, etc.)	
If Workover/Re-entry: Old Well Info as follows:	feet depth to: w/ Alf 3 - Dig sx cmt.
Operator: NA	Drilling Fluid Management Plan (Data must be collected from the Reserve Pit)
Well Name: NA	
Original Comp. Date: NA Original Total Depth: NA	
Deepening Re-perf Conv. to Enhr Conv.	to SWD Dewatering method used:
Plug Back: — Plug Back Total Depth	Location of fluid disposal if hauled offsite:
Commingled Docket No.:	Operator Name:
Dual Completion	Lagge Names
Other (SWD or Enhr.?) Docket No.: 06-09-09 06-09-09 06-10-09	Quarter Sec TwpS. R East _ West
06-09-09 06-09-09 06-10-09 Spud Date or Date Reached TD Completion Date or	
Recompletion Date Recompletion Date	
Kansas 67202, within 120 days of the spud date, recompletion, wor of side two of this form will be held confidential for a period of 12 me	e filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, rkover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information onths if requested in writing and submitted with the form (see rule 82-3-107 for confidenceologist well report shall be attached with this form. ALL CEMENTING TICKETS MUST CP-111 form with all temporarily abandoned wells.
All requirements of the statutes, rules and regulations promulgated to are complete and correct to the best of my knowledge.	o regulate the oil and gas industry have been fully complied with and the statements herein
Signature: [[DUBLE DESCRIPTION Date: 07/0.	KCC Office Use ONLY
	Letter of Confidentiality Received
Subscribed and sworn to before me this day of	, If Denied, Yes Date:
20 09	Wireline Log Received
Notary Public: Shelly Q. Harmo	Geologist Report Received
Date Commission Expires: Danuary 13 2013	UIC Distribution
- Date Continuesion Expires: California (A. 16. A.C.)	



Side Two

ē.

Operator Name: Kinde	r Morgan Interstate	Gas Transmission L	LC Lease Na	me: P	(P #66	and decorate at 1970 at	_ Well #:	
Sec. 14 Twp. 4	S. R. <u>27</u>	■ East West	County: _	Decatu	ır			
INSTRUCTIONS: Sho time tool open and clos recovery, and flow rates surveyed. Attach final of	ed, flowing and shut if gas to surface tes	in pressures, whether s t, along with final chart	shut-in pressui	re reach	ed static level,	hydrostatic pres	sures, bottom l	nole temperature, fluid
Drill Stem Tests Taken (Attach Additional Sheets)		☐ Yes 📝 No		Log Formatio		(Top), Depth and Datum		Sample
Samples Sent to Geological Survey		☐ Yes ☑ No		Name			Тор	Datum
Cores Taken Electric Log Run (Submit Copy)		☐ Yes ☑ No ☐ Yes ☑ No		F	RECEIVE	D		
List All E. Logs Run:					UL 06 20			
					C WICH	ITA		
		CASING Report all strings set		New ace, interi		ion, etc.		
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Fi		Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives
Surface	16"	10"	SCH. 40 P	ovc	20'	Bent. Chips	10	100% Bentonite
		ADDITIONA	I CEMENTING	2 / SOUE	F7F PFCOPD			
Purpose: Perforate Protect Casing Plug Back TD Plug Off Zone	Depth Top Bottom	Type of Cement	ADDITIONAL CEMENTING / Type of Cement #Sacks Used		Type and Percent Additives			
Shots Per Foot	PERFORATION Specify F		Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) Depth					
						•		
TUBING RECORD:	Size:	Set At:	Packer At:		Liner Run:	Yes N)	L
Date of First, Resumed F	Production, SWD or Enf	nr. Producing Me	ethod:] Flowing	Pumpi	ng Gas L	.ift Oth	ner <i>(Explain)</i>
Estimated Production Per 24 Hours	Oil	Bbls. Gas	Mcf	Water	. В	Bbls.	Gas-Oil Ratio	Gravity
DISPOSITIO	DISPOSITION OF GAS: MET				OF COMPLETION: PRODUCTION INTERVAL:			
Vented Sold	Used on Lease	Open Hole Other (Specify)	Perf.	Dually (Comp. Co	mmingled		

