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KCC WICHITA

KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASForm ACO-1
September 1999
Form Must Be Typed

ORIGINAL

Operator: License # 33576
 Name: David L. Cornish Dba Cornish Oil Co.
 Address: 8467 S.E. Teter Rd.
 City/State/Zip: Leon Ks. 67074
 Purchaser: _____
 Operator Contact Person: David L. Cornish
 Phone: (316) 742-3678
 Contractor: Name: Braden Petroleum & Well Plugging
 License: 32475
 Wellsite Geologist: _____
 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: Range Oil Co.
 Well Name: McAllister #1
 Original Comp. Date: 04-01-82 Original Total Depth: 2832
 _____ 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. _____
 10-17-05 10-27-05 10-27-2005
 Spud Date or Date Reached TD Completion Date or
 Recompletion Date Recompletion Date

API No. 15 - 015-21920-00-01
 County: Butler
 SW _____ Sec. 28 Twp. 26S S. R. 6 ☒ East ☐ West
1420 feet from (S) / N (circle one) Line of Section
4171 1320 feet from (E) / W (circle one) Line of Section
OPS per DG
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Obryan #1-A Well #: _____
 Field Name: Schaffer-Reynolds
 Producing Formation: _____
 Elevation: Ground: 1350 Kelly Bushing: _____
 Total Depth: _____ Plug Back Total Depth: _____
 Amount of Surface Pipe Set and Cemented at 250 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.

CMWO
Drilling Fluid Management Plan
 (Data must be collected from the Reserve Pit) DJA AIT I NR
10-13-08
 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.: _____

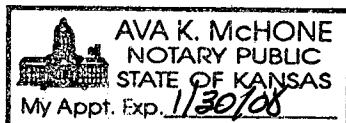
INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, Wichita, Kansas 67202, within 120 days of the spud date, recompletion, workover or conversion of a well. Rule 82-3-130, 82-3-106 and 82-3-107 apply. Information of side 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: [Signature]
 Title: owner Date: 11-18-05
 Subscribed and sworn to before me this 18th day of November
20 05
 Notary Public: Ava K. McHone
 Date Commission Expires: 1-30-08

KCC Office Use ONLY

NO Letter of Confidentiality Received
 If Denied, Yes ☐ Date: _____
 _____ Wireline Log Received
 _____ Geologist Report Received
 _____ UIC Distribution





Operator Name: David L. Cornish Db a Cornish Oil Co. Lease Name: Obryan #1-A Well #: _____
 Sec. 28 Twp. 26S S. R. 6 ☒ East ☐ West County: Butler

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 ☐ 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

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CASING RECORD ☐ New ☐ 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
		168 ft surface	Casing				
		Exception Granted	on 10-14-05				

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
___ Perforate				
___ Protect Casing				
___ Plug Back TD				
___ Plug Off Zone				

Shots Per Foot	PERFORATION 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	Packer At	Liner Run ☐ Yes ☐ No
Date of First, Resumerd Production, SWD or Enhr.		Producing Method ☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas		METHOD OF COMPLETION		Production Interval	
☐ Vented	☐ Sold	☐ Used on Lease	☐ Open Hole	☐ Perf.	☐ Dually Comp.
(If vented, Submit ACO-18.)			☐ Other (Specify)		