

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION  
**WELL COMPLETION FORM**  
WELL HISTORY - DESCRIPTION OF WELL & LEASE

Form ACO-1  
September 1999  
Form Must Be Typed

ORIGINAL

Operator: License # 33581  
Name: Curtis E. Breckon  
Address: 108 Quail Creek Lane  
City/State/Zip: Skiatook, OK 74070  
Purchaser: None  
Operator Contact Person: Curtis E. Breckon  
Phone: ( 918 ) 396-0877  
Contractor: Name: Curtis E. Breckon  
License: 33581  
Wellsite Geologist: Curtis E. Breckon

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. \_\_\_\_\_

04/25/2005 05/06/2005 05/12/2005

Spud Date or Date Reached TD Completion Date or Recompletion Date

API No. 15 - 003-24274-0000

County: Anderson

NE NW SW NW Sec. 35 Twp. 22 S. R. 19 ☒ East ☐ West

1485 feet from S N (circle one) Line of Section

465 feet from E W (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE NW SW

Lease Name: Strickler Well #: 2

Field Name: Wildcat

Producing Formation: None

Elevation: Ground: 1080 Kelly Bushing: 1084

Total Depth: 1100 Plug Back Total Depth: 1100

Amount of Surface Pipe Set and Cemented at 28 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 cm.

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

Chloride content 0 ppm Fluid volume 20 bbls

Dewatering method used Evaporation and backfill

Location of fluid disposal if hauled offsite:

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

Lease Name: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West

County: \_\_\_\_\_

**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: Curtis E. Breckon

Title: Geoscientist Date: 12/07/2005

Subscribed and sworn to before me this 7TH day of DEC

20 05.

Notary Public: William M. Spicer

Date Commission Expires: JULY 20, 2009

KCC Office Use ONLY

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

WILLIAM M. SPICER — NOTARY PUBLIC  
COUNTY OF NATRONA STATE OF WYOMING  
MY COMMISSION EXPIRES JULY 20, 2009

ORIGINAL

Operator Name: Curtis E. Breckon Lease Name: Strickler Well #: 2  
 Sec. 35 Twp. 22 S. R. 19 ☒ East ☐ West County: Anderson

**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 (Attach Additional Sheets)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input checked="" type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Soil	0	GL
Electric Log Run (Submit Copy)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Gravel	5	GL
List All E. Logs Run:		Lime and Shale	8	GL
		Shale, Siltstone and coal	840	GL
		Sandstone and Silty Shale	1040	GL
		Black Shale	1060	GL
		TD in Black Shale D&A	1100	GL

CASING RECORD <input checked="" 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
Surface Casing	12 inch	8-5/8 inch	28	28	Class 1 Portland	6	None

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate	500 - 1000	50/50 Poz mix	10@500 10@1000	50% Portland 50% fly ash
<input type="checkbox"/> Protect Casing				
<input checked="" type="checkbox"/> Plug Back TD	Surface - 200	50/50 Poz mix	50	50% Portland 50% fly ash
<input checked="" 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 (Amount and Kind of Material Used)	Depth
None	None	None	

TUBING RECORD		Size	Set At	Packer At	Liner Run
None					<input type="checkbox"/> Yes <input checked="" 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
	0	0	0		

Disposition of Gas	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, Submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify)	<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)