

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 # 33168  
Name: WOOLSEY OPERATING COMPANY, LLC  
Address: 125 N. Market, Suite 1000  
City/State/Zip: Wichita, Kansas 67202-1775  
Purchaser: n/a  
Operator Contact Person: Dean Pattison, Operations Manager  
Phone: ( 316 ) 267-4379 ext 107  
Contractor: Name: CLARKE CORP  
License: 5105  
Wellsite Geologist: NONE

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  Delayed completion  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:  
Operator: Rupp-Ferguson / Woolsey Operating Company, LLC

Well Name: Powell #1 / Luthi 1  
Original Comp. Date: 8/27/54 Original Total Depth: 4685

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. D - 28,422

|  |  |
|--|--|
| <u>10/18/04</u>                              | <u>10/28/04</u>                                    |
| <del>Spud Date or</del><br>Recompletion Date | <del>Completion Date or</del><br>Recompletion Date |

API No. 1. 15-007-00557-0002  
County: Barber  
C - SW - SW - SW Sec. 36 Twp. 33 S. R. 11  East  West  
330 feet from (S) / N (circle one) Line of Section  
330 feet from E / (W) (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
(circle one) NE SE NW (SW)  
Lease Name: LUTHI 'OWWO' Well #: 1 SWD  
Field Name: Roundup South

Producing Formation: n/a  
Elevation: Ground: 1444 Kelly Bushing: 1455  
Total Depth: 4730 Plug Back Total Depth: n/a  
Amount of Surface Pipe ~~Set and Cemented~~ <sup>existing</sup> at 227 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.

Drilling Fluid Management Plan Alt I NCR 1-14-09  
(Data must be collected from the Reserve Pit)

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: \_\_\_\_\_

Title: Dean Pattison, Operations Manager Date: October 15, 2007

Subscribed and sworn to before me this 15<sup>th</sup> day of October, 2007.

Notary Public: Debra K. Clingan  
Date Commission Expires: March 27, 2010

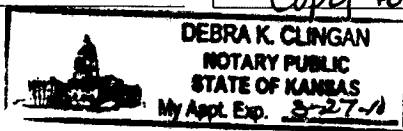
**KCC Office Use ONLY**

N Letter of Confidentiality Attached  
If Denied, Yes  Date: \_\_\_\_\_

Wireline Log Received **RECEIVED**  
Geologist Report Received **KANSAS CORPORATION COMMISSION**

UIC Distribution **OCT 15 2007**

*Copy to UIC*



CONSERVATION DIVISION  
WICHITA, KS

Operator Name: WOOLSEY OPERATING COMPANY, LLC Lease Name: LUTHI 'OWWO' Well #: 1 SWD  
 Sec. 36 Twp. 33 S. R. 11  East  West County: Barber

**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)*

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum

List All E. Logs Run:

Cement Bond log (squeeze)

| 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 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
| 4              | Stalnaker 3984-4044'  | Acid: 3500 gal 10% MICA   | same  |
|                |   |   |       |
|                |   |   |       |
|                |   |   |       |

| TUBING RECORD                                   | Size   | Set At  | Packer At   | Liner Run   |
|---|--|---------|-------------|---|
|   | 2 3/8"   | 3951'   | 3961'       | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumed Production, SWD or Enhr. | Producing Method   |         |             |   |
| First disposal: 03/04/2005                      | <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 \_\_\_\_\_

