

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 # 5970  
Name: John A. Elmore  
Address: 776 HWY 99  
City/State/Zip: Sedan, KS 67361  
Purchaser: Plains  
Operator Contact Person: John A. Elmore  
Phone: ( 620 ) 249-2519  
Contractor: Name: Elmore's Inc.  
License: 32884  
Wellsite Geologist: None

Designate Type of Completion:  
 New Well  Re-Entry  Workover  
 Oil  SWD  SLOW  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. \_\_\_\_\_

<u>7-6-07</u>	<u>7-11-07</u>	<u>7-17-07</u>
Spud Date or Recompletion Date	Date Reached TD	Completion Date or Recompletion Date

API No. 15 - 019-26805 ~~00-00~~  
County: Chautauqua

SW SW NE Sec. 32 Twp. 33 S. R. 12  East  West  
2475 feet from S  (circle one) Line of Section  
3235 feet from E  (circle one) Line of Section

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

Lease Name: Stephenson Well #: 5  
Field Name: Peru

Producing Formation: Peru  
Elevation: Ground: 825 Kelly Bushing: \_\_\_\_\_

Total Depth: 1040 Plug Back Total Depth: \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 40 Feet

Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set: \_\_\_\_\_ Feet

If Alternate II completion, cement circulated from 1038  
feet depth to surface w/ 120 sx cmt.

Drilling Fluid Management Plan Alt II NCR 1-21-09  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume 80 bbls  
Dewatering method used \_\_\_\_\_

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

Operator Name: John Elmore

Lease Name: Casement License No.: 5970

Quarter SW Sec. 6 Twp. 34 S. R. 11  East  West  
County: Chautauqua Docket No.: E21275

**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: John A. Elmore  
Title: Owner Date: 11-2-07

Subscribed and sworn to before me this 2nd day of November,  
2007.

Notary Public: Louise Good  


**KCC Office Use ONLY**

Letter of Confidentiality Received  
 If Denied, Yes  Date: \_\_\_\_\_  
 Wireline Log Received **RECEIVED**  
KANSAS CORPORATION COMMISSION  
 Geologist Report Received  
 UIC Distribution **NOV 05 2007**

CONSERVATION DIVISION  
WICHITA, KS

**ORIGINAL**

Operator Name: John A. Elmore Lease Name: Stephenson Well #: 5  
 Sec. 32 Twp. 33 S. R. 12  East  West County: Chautauqua

**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:

**Cornish Radioactivity Log**

Log Formation (Top), Depth and Datum  Sample  
 Name Top Datum  
 Peru 976 996

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
Surface Pipe	9 1/4	7"	25	40	Portland	8	None
Casing	5 5/8	2 7/8	6	1038	Portland	120	2% Gel

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<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 Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth
2	20 shots 976-986	100 Gal 15% HCL	976
2	13 shots 990-996	7000lb Frac * 12/20 Sand	
		Dropped 14 Balls	
		Used 162 BBL Gel Water	

TUBING RECORD	Size	Set At	Packer At	Liner Run
	1"	1037		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Date of First, Resumerd Production, SWD or Enhr.	Producing Method
7-17-07	<input type="checkbox"/> Flowing <input checked="" 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
	9	0	30	0	32

Disposition of Gas: None  
 Vented  Sold  Used on Lease (If vented, Submit ACO-18.)  
 METHOD OF COMPLETION:  Open Hole  Perf.  Dually Comp.  Commingled  
 Other (Specify) \_\_\_\_\_  
 Production Interval: \_\_\_\_\_

