

15-179-20672-00-01

FORM MUST BE TYPED

SIDE ONE

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION  
WELL COMPLETION FORM  
ACO-1 WELL HISTORY  
DESCRIPTION OF WELL AND LEASE

Operator: License # 5886  
Name: Chief Drilling, Inc.  
Address 120 S. Market  
Suite 300  
City/State/Zip Wichita, KS 67202  
Purchaser: Koch  
Operator Contact Person: Douglas W. Thimesch  
Phone (316) 262-3791  
Contractor: Name: \_\_\_\_\_

License: \_\_\_\_\_  
Wellsite Geologist: \_\_\_\_\_  
Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SUD  S10W  Temp. Aband. DIVISION  
 Gas  ENHR  SIGW  Wichita, Kansas  
 Dry  Other (Core, WSV, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:  
Operator: Rains & Williamson  
Well Name: Fuller  
Comp. Date 2-19-83 Old Total Depth \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Inj/SUD  
 Plug Back \_\_\_\_\_ PSTD  
 Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_  
 Other (SUD or Inj?) \_\_\_\_\_ Docket No. \_\_\_\_\_  
11-20-92 11-20-92 11-30-92  
Spud Date Date Reached TD Completion Date

API NO. 15- 179-20,672  
County Sheridan  
SW - NE - NW. Sec. 10 Twp. 10S Rge. 26W      
4290 FSL Feet from S/N (circle one) Line of Section  
3630 FEL Feet from E/W (circle one) Line of Section  
Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)  
Lease Name Fuller Well # 3  
Field Name Fuller  
Producing Formation Lansing  
Elevation: Ground 2634 KB 2642  
Total Depth 4372 PSTD ---  
Amount of Surface Pipe Set and Cemented at 286' Feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set \_\_\_\_\_ Feet  
Alternate II completion, cement circulated from \_\_\_\_\_  
feet depth to \_\_\_\_\_ w/ \_\_\_\_\_ sx cnt.  
Drilling Fluid Management Plan 1-11-93  
(Data must be collected from the Reserve Pit)  
Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls  
Desulfuring method used \_\_\_\_\_  
Location of fluid disposal if hauled offsite: \_\_\_\_\_  
Operator Name \_\_\_\_\_  
Lease Name \_\_\_\_\_ License No. \_\_\_\_\_  
Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W  
County \_\_\_\_\_ Docket No. \_\_\_\_\_

RECEIVED  
STATE CORPORATION COMMISSION  
DEC 29 1992  
12-29-1992  
Temp. Aband. DIVISION  
Wichita, Kansas

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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 on 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 Vice President Date 12-22-92  
Subscribed and sworn to before me this 22 day of December, 19 92.  
Notary Public [Signature]

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Geologist Report Received  
Distribution  
 KCC  SUD/Rep  NGPA  
 KGS  Plug  Other (Specify)

Date Commission Expires 1-22-95  
BETTY M. ABBOTT  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Exp. 1-22-95

SIDE TWO

Operator Name Chief Drilling, Inc. Lease Name Fuller Well # 3  
 Sec. 10 Twp. 10S Rge. 26W  East County Sheridan  
 West

**INSTRUCTIONS:** Show important tops and base of formations penetrated. Detail all cores. Report all drill stem 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 during test. Attach extra sheet if more space is needed. Attach copy of log.

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

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
<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
4	4058-4062'	1000 gal 15% INS	4070'

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 3/8"	4140'	--		
Date of First, Resumed Production, SVD or Inj.	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)				
12-2-92					
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	15	-0-	100	---	

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: \_\_\_\_\_