

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

API NO. 15- 193-20,628-0000 ORIGINAL

County Thomas

N/2 NE NE Sec. 1 Twp. 10S Rge. 32 XXW

330 Feet from S/N (circle one) Line of Section

660 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 Albers Well # 3

Field Name \_\_\_\_\_

Producing Formation \_\_\_\_\_

Elevation: Ground \_\_\_\_\_ KB \_\_\_\_\_

Total Depth 4470' PBSD \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 321.16 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 D&A 89 10-12-95  
(Data must be collected from the Reserve Pit)

Chloride content 1800 ppm Fluid volume 1285 bbls

Dewatering method used Evaporation

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

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

Lease Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W

County \_\_\_\_\_ Docket No. \_\_\_\_\_

Operator: License # 30407

Name: Black Petroleum Co.

Address P.O. Box 12922

City/State/Zip Wichita, Ks. 67277

Purchaser: \_\_\_\_\_

Operator Contact Person: Tom Black

Phone (316) 942-2741

Contractor: Name: Abercrombie RTD, Inc.

License: 30684

Wellsite Geologist: J. E. Jespersen

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:

Operator: N/A

Well Name: \_\_\_\_\_

Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_

Deepening \_\_\_\_\_ Re-perf. \_\_\_\_\_ Conv. to Inj/SWD \_\_\_\_\_

Plug Back \_\_\_\_\_ PBSD \_\_\_\_\_

Commingled \_\_\_\_\_ Docket No. \_\_\_\_\_

Dual Completion \_\_\_\_\_ Docket No. \_\_\_\_\_

Other (SWD or Inj?) \_\_\_\_\_ Docket No. \_\_\_\_\_

10-28-94 11-04-94 11-04-94

Spud Date Date Reached TD Completion Date

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 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 Thomas E. Black

Title Pres. Date 2/28/95

Subscribed and sworn to before me this 28th day of February, 19 95.

Notary Public Karen J. Benbrook

Date Commission Expires 9/28/98

K.C.C. OFFICE USE ONLY

F \_\_\_\_\_ Letter of Confidentiality Attached

C \_\_\_\_\_ Wireline Log Received

C \_\_\_\_\_ Geologist Report Received

Distribution

KCC \_\_\_\_\_ SWD/Rep \_\_\_\_\_ NGPA

\_\_\_\_\_ KGS \_\_\_\_\_ Plug \_\_\_\_\_ Other

(Specify)

STATE CORPORATION COMMISSION  
3-1-95  
MAR 1 1995

KAREN J. BENBROOK  
NOTARY PUBLIC  
STATE OF KANSAS  
My Appt. Expires 9/28/98

SIDE TWO

Operator Name Black Petroleum Company Lease Name Albers Well # 3  
 Sec. 1 Twp. 10S Rge. 32  East County Thomas  
 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 (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<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	Anhydrite	2648	+442
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	B/Anhydrite	2679	+411
List All E.Logs Run:	<u>None</u>	Heebner	4069	-979
		Toronto	4096	-1006
		Lansing	4116	-1026
		Stark	4364	-1274
		B/Kans City	4389	-1299
		RTD	4470	-1380

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		8 5/8"	20	321.16	60/40pos	175	2%gel, 3%cc

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

TUBING RECORD	Size	Set At	Packer At:	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
<u>D&amp;A</u>				
Estimated Production Per 24 Hours	Oil <u>N/A</u> Bbls.	Gas <u>N/A</u> Mcf	Water <u>N/A</u> 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

Production Interval  Other (Specify) \_\_\_\_\_

ORIGINAL

ALBERS #3  
N/2 NE/4 NE/4 Sec. 1-10S-32W  
Thomas County, Kansas  
Drill Stem Test

API#15-193-20628-0000

DST #1                    4363-4390 ("L" Zone)

Weak blow died in 7 min. IFP

No Blow FFP

Recovered:

Initial Flow Pressures:

Initial Shut-In Pressure:

Final Flow Pressures:

Final Shut-In Pressure:

Initial Hydrostatik Pressure:

Final Hydrostatic Pressure:

Bottomhole Temperature:

2 feet mud - *no oil shows*

35# to 35# / 30 min.

46# / 60 min.

35# to 35# / 30 min.

35# / 60 min.

2227#

2192#

108 degrees

RECEIVED  
STATE CORPORATION COMMISSION

MAR 01 1995

COMMISSIONER OF REVENUE  
STATE OF KANSAS

Phone 913-483-2627, Russell, KS  
 Phone 316-793-5861, Great Bend, KS

Phone 913-625-5516, Hays, KS  
 Phone 913-672-3471, Oakley, KS

Phone 316-886-5926, Medicine Lodge, KS  
 Phone 913-798-3843, Ness City, KS

# ALLIED CEMENTING CO., INC.

Home Office P. O. Box 31

Russell, Kansas 67665

7808 ORIGINAL

NEW

Date	10-28-94	Sec.	1	Twp.	10	Range	32	Called Out	6:00 PM	On Location	9:15 PM	Job Start	12:00 AM	Finish	12:30 AM
Lease	Alberta	Well No.	1	Location	2N2E Oakley			County	Thomas	State	KS				
Contractor	Abercrombie Rig 8			Owner	Black Petroleum Co										
Type Job	Surface			To Allied Cementing Co., Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.											
Hole Size	12 1/4	T.D.	326'	Charge To	Black Petroleum Co										
Csg.	8 5/8	Depth	321'	Street	P.O. Box 12922										
Tbg. Size		Depth		City	Wichita State KS 67277										
Drill Pipe		Depth		The above was done to satisfaction and supervision of owner agent or contractor.											
Tool		Depth		Purchase Order No.											
Cement Left in Csg.	15'	Shoe Joint		X	Crittenden, Mo.										
Press Max.		Minimum		<b>CEMENT</b>											
Meas Line	NO	Displace	19.8 Bbls	Amount Ordered	190 sks 60/40 3% cc 2% Gr-1										
Perf.				Consisting of											
<b>EQUIPMENT</b>				Common											
Pumptrk	No. 191	Cementor	Dean	Poz. Mix											
		Helper	Wayne	Gel.											
Pumptrk	No.	Cementor		Chloride											
		Helper		Quickset											
Bulktrk	218	Driver	R. G.	Sales Tax											
Bulktrk		Driver		Handling											
DEPTH of Job				Mileage											
Reference:	Pump Trk Chrg			Sub Total											
	2 2 1/2 per M. lbs			Tax											
	8 5/8 Surface Plug			Total											
Remarks:	Ran 7 Joints 8 5/8 Csg Cemented w/ 190 sks 60/40 3% cc 2% Gel Cement did circulate														
Thank You															

RECEIVED BY                     

STATE COMMERCE COMMISSION  
 MAR 11 1995

Phone 913-483-2627, Russell, KS  
 Phone 316-793-5861, Great Bend, KS

Phone 913-625-5516, Hays, KS  
 Phone 913-672-3471, Oakley, KS

Phone 316-886-5926, Medicine Lodge, KS  
 Phone 913-798-3843, Ness City, KS

# ALLIED CEMENTING CO., INC.

Home Office P. O. Box 31

Russell, Kansas 67665

0006645  
**ORIGINAL**

*New*

Date <i>11-3-94</i>	Sec. <i>1</i>	Twp. <i>10</i>	Range <i>32</i>	Called Out <i>9:45 AM</i>	On Location <i>12:50 PM</i>	Job Start <i>1:15 PM</i>	Finish <i>4:30 PM</i>
Lease <i>Allison</i>	Well No. <i>3</i>	Location <i>Oakley 2N-2E</i>			County <i>Thomas</i>	State <i>KS</i>	
Contractor <i>Alvion Jones</i>				Owner <i>Same</i>			
Type Job <i>R. Plug</i>				To Allied Cementing Co., Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.			
Hole Size <i>7 3/4"</i>		T.D. <i>4470'</i>		Charge To <i>Black Pt. Co.</i>			
Csg.		Depth		Street			
Tbg. Size		Depth		City			
Drill Pipe <i>4 1/2"</i>		Depth <i>2660'</i>		State			
Tool		Depth		The above was done to satisfaction and supervision of owner agent or contractor.			
Cement Left in Csg.		Shoe Joint		Purchase Order No.			
Press Max.		Minimum		<i>X Anthony Mart</i>			
Meas Line		Displace		<b>CEMENT</b>			
Perf.				Amount Ordered <i>19060/40 6799d 7 Flo</i>			

**EQUIPMENT**

No.	Cementer	<i>Mike</i>
Pumptrk <i>224</i>	Helper	
No.	Cementer	<i>Bill</i>
Pumptrk	Helper	
Bulktrk <i>199</i>	Driver	
Bulktrk	Driver	

DEPTH of Job <i>2660</i>	
Reference:	<i>Pump Job Chg</i>
	<i>Pump Job Mileage</i>
	<i>TWP</i>
	Sub Total
	Tax
	Total

Remarks: *1st Plug at 2660' w/ 255ka*  
*2nd Plug at 1790' w/ 1005ka*  
*3rd Plug at 370' w/ 405ka*  
*4th Plug at 40' w/ 105ka*

Consisting of	
Common	
Poz. Mix	
Gel.	
Chloride	
Quickset	
	Sales Tax
Handling	
Mileage	
	Sub Total
	Total

Floating Equipment

STATE CORPORATION COMMISSION  
 MAR 01 1995