

KCC OIL/GAS REGULATORY OFFICES

Date: 08/18/2010

District: #1

Case #: _____

New Situation

Lease Inspection

Response to Request

Complaint

Follow-Up

Field Report

Operator License No: 5144

API Well Number: 15-135-25115-0000

Op Name: Mull Drilling Company, Inc.

Spot: SW NE SE NE Sec 4 Twp 20 S Rng 23 E / W

Address 1: 1700 N. Waterfront Pkwy

1,783' (3579FS) Feet from N / S Line of Section

Address 2: Bldg. 1200

335 (345) Feet from E / W Line of Section

City: Wichita

GPS: Lat: 38.34426 Long: 99.86263 Date: 8/18/2010

State: KS Zip Code: 67206-6637

Lease Name: MARS Well #: 1-4

Operator Phone #: 316-264-6366

County: Ness

Reason for Investigation: After ~~316~~ 800-658-1632

Witness Alt. II completion

Problem:

None: Cement circulated to surface and stayed

Persons Contacted:

Jerry Roane Ph: 316-264-6366

Findings:

TO. @ 4,780'
8 5/8" @ 221' with 165 sxs cmr.
5 1/2" @ 4,730' with 270 sxs cmr.
Port Collar @ 1,499', cemented with 175 sxs, SMD w/14 # 26.5sd
with 14 sxs top it Cement by Swift Services. Wild West
Well Service over the hole.

Action/Recommendations: Follow Up Required Yes No Date: _____

Alternate II requirements have been met, Cement circulated to the surface and stayed

Verification Sources:

RBDMS KGS TA Program
 T-I Database District Files Courthouse
 Other: _____

Photos Taken: _____

By: Jerry W. Stapleton
DIRT II

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

RECEIVED
AUG 31 2010
KCC DODGE CITY

RECEIVED
SEP 07 2010
KCC WICHITA

Form: _____

Date: _____

District: _____

License #: _____

Op Name: _____

Spot: _____ Sec _____ Twp _____ S Rng _____ E W

County: _____

Lease Name: _____ Well #: _____

I.D. Sign Yes No

Tank Battery Condition
Condition: Good Questionable Overflowing

Pits, Injection Site
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Oil Spill Evidence

Abandoned Well Potential Pollution Problem Yes No

Lease Cleanliness

Very Good Satisfactory Poor Very Bad

Gas Venting Yes No

Pits
Fluid Depth: _____ ft; Approx. Size: _____ ft. x _____ ft.

Saltwater Pipelines
Leaks Visible: Y N Tested for Leaks: Y N

Flowing Holes

TA Wells

Monitoring Records

SWD/ER Injection Well Yes No

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Permit #: _____ Pressure - Actual: _____ psi; Authorized: _____ psi

Gauge Connections Yes No

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

Tubing: _____; T/C Annulus: _____; C/SP Annulus: _____

API Number	Footages	Spot Location	GPS	Well #	Well Status

Retain 1 Copy District Office
Send 1 Copy to Conservation Division

Form: _____