FORM MUST BE TYPED

SIDE ONE

ORIGINAL

| Tym Hoor be Theb | 200 000 3 | , or the same of t |
|------------------------------------|---------------------------------|--|
| STATE CORPORATION COM | | API NO. 15- <u>051-25,171-00-00</u> |
| WELL COMPLETI | | CountyEllis |
| ACO-1 WELL H | | 60' South & 130' West of |
| DESCRIPTION OF W | ♥ 'C'. '3 | |
| DESCRIPTION OF W | ELL AND LEASE | of - C - SW - NW Sec. 2 Twp. 11S Rge. 17 X W |
| Operator: License # | 5135 | Feet from S(N)(circle one) Line of Section |
| | John O. Farmer, Inc. | |
| | P.O. Box 352 | Footages Calculated from Nearest Outside Section Corner: |
| | | NE, SE (NW) or SW (circle one) |
| City/State/Zip | Russell, KS 67665 | 112, 52 (110) 511 (511) 512 |
| , | | Lease NameAnderson Well #1 |
| Purchaser: | | Field Name <u>Brungardt</u> |
| | | Producing Formation |
| Operator Contact Person: | John O. Farmer IV | |
| | 483-3144 | Elevation: Ground |
| | | Total Depth 3620' PBTD |
| Contractor: Name: <u>Discover</u> | | |
| | | Amount of Surface Pipe Set and Cemented at Feet |
| Wellsite Geologist: <u>Randall</u> | Kilian | |
| | | Multiple Stage Cementing Collar Used? YesX No |
| Designate Type of Completion | | If yes, show depth set Feet |
| <u>X</u> New Well Re- | Entry Workover | ļ |
| | | If Alternate II completion, cement circulated from |
| Oil SWD | | feet depth tow/sx cmt. |
| Gas ENHR | | P. Al. Ca. 1 41 |
| | e, WSW, Expl., Cathodic, etc.) | , , |
| If Workover/Re-Entry: old well | into. as follows: | (Data must be collected from the Reserve Pit) |
| Openator | | Obligation and the Company Compa |
| Well Name: | | Chloride content 22,000 ppm Fluid volume 240 bbls |
| Comp Date | Old Total Depth | Dewatering method used <u>allow to dry by evaporation</u> |
| comp. Date | _ otd Total Deptil | |
| Deepening Re-n | erf Conv. to Inj/SWD | Location of fluid disposal if hauled offsite: |
| Plug Back | | Operator Name NA |
| | Docket No. | Speciator name |
| Dual Completion I | Docket No. | Lease Name License No |
| Other (SWD or Inj?) | Docket No. | Erosino no. |
| - | | Quarter Sec TwpS RngE/W |
| 11-13-02 11-20-0 | 02 11-20-02 | |
| Spud Date Reach | | County Docket No. |
| | | |
| INSTRUCTIONS: An original a | nd two copies of this form sha | all be filed with the Kansas Corporation Commission, 130 S. Market, |
| Room 2078, Wichita, Kansas 6 | 7202, within 120 days of the s | pud date, recompletion, workover or conversion of a well. |
| Rule 82-3-130, 82-3-106 and 8 | 82-3-107 apply. Information o | on side two of this form will be held confidential for a period of |
| 12 months if requested in wr | iting and submitted with the f | form (see rule 82-3-107 for confidentiality in excess of 12 |
| months). One copy of all win | reline logs and geologist well | report shall be atached 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 statute | es, rules and regulations prom | ulgated to regulate the oil and gas industry have been fully complic |
| with and the statements herein | are complete and correct to the | he best of my knowledge. |
| 1 1 4 -7 | | |
| 1 Al D Falme | , tr | K.C.C. OFFICE USE ONLY |

| Signature A.D. Farmy III | |
|---|---|
| John O. Farmer III | <u> </u> |
| Title <u>President</u> | Date <u>12-23-02</u> |
| Subscribed and sworn to before me thi2 23rd | day of <u>December</u> , |
| 20 <u>02</u> . | _ |
| Notary Public Margaret | a. Schulte |
| Margaret A. So | chulte |
| Date Commission Expires | 2 1 1 2 1 2 1 2 1 2 2 2 2 2 2 2 2 2 2 2 |
| d variable A | 171 18 Page - A 14 |

| A 4- | OFFICE USE ON Confidentiali | | | | | |
|-------------------------|--------------------------------|-----------|--|--|--|--|
| C Wireline Log Received | | | | | | |
| C Geologist | | | | | | |
| Distribution | | | | | | |
| ксс | SWD/Rep | NGPA | | | | |
| KGS | Plug | Other | | | | |
| | | (Specify) | | | | |

Form ACO-1 (7-91)

SIDE TWO ____ Lease Name _____ Anderson _____ Well # ____ Operator Name _____ John O. Farmer, Inc. County __ Ellis Sec. 2 Twp. 11S Rge. 17 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. ĹX^j Log نا Sample Drill Stem Tests Taken Formation (Top), Depth and Datums LXJ Yes L No (Attach Additional Sheets.) Name Top Datum Anhdyrite 11601 (+791)☐ Yes ☐ No Samples Sent to Geological Survey 11941 (+757)Base/Anhydrite Topeka 28771 (-926)L Yes LX No. 31031 Cores Taken Heebner Shale (-1152)Toronto י3123 (-1172)「X」 □ No Electric Log Run Lansing 3145 (-1194)(Submit Copy.) Stark Shale 33421 (-1391)Base/KC 33841 (-1433)(-1463)List All E.Logs Run: Conglomerate 34141 ن3500 (-1549)Dual Induction Log Sonic Log Simpson Dolomite Arbuckie 35231 (-1572)Compensated Density/Neutron Log -3618 -(-1667)--L.T.D.-CASING RECORD LX New L Used Report all strings set-conductor, surface, intermediate, production, etc. Type and Percent Purpose of String Size Hole Size Casing Weight Setting Type of # Sacks Add<u>itives</u> Drilled Set (In O.D.) Lbs./Ft. Depth Cement Used Lite 155 3%,CC, 2% gel 23# 2301 Common 8-5/8" Surface 12-1/4" ADDITIONAL CEMENTING/SQUEEZE RECORD Purpose: Depth Type and Percent Additives Top Bottom Type of Cement #Sacks_Used Perforate Protect Casing Plug Back TD Plug Off Zone Acid, Fracture, Shot, Cement Squeeze Record PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated (Amount and Kind of Material Used) Depth Shots Per Foot Liner Run Packer At TUBING RECORD Size Set At ☐ Yes ☐ No Date of First, Resumed Production, SWD or Inj. Producing Method \square Flowing \square Pumping \square Gas Lift \square Other (Explain) Gas-Oil Ratio Gravity Water Bbls. Estimated Production Oil Bbls. Gas Mcf Per 24 Hours METHOD OF COMPLETION Production Interval Disposition of Gas: Upen Hole U Perf. U Dually Comp. U Commingled └ Vented └ Sold └ Used on Lease (If vented, submit ACO-18.) Other (Specify)

ALLIED CEMENTING CO., INC. 11482

Federal Tax I.D.#

OX 31

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665

SERVICE POINT:

ORIGINAL

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| CONTRACTOR [|)-5000. | 1 My #2 | • | OWNER | | | |
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| TUBING SIZE | | | TH | | | <u>-</u> - | 290601 |
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| PRES. MAX | | | MMUM | _ COMMON | <u> </u> | _@ <u>645</u> | <u>030</u> 75 |
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| | | | Ĺ | | PRINTE | D NAME | |

ALLIED CEMENTING CO., INC. 11502 Federal Tax I.D.#

REMIT TO P.O. BOX 31 RUSSELL, KANSAS 67665

SERVICE POINT:

ORIGINAL

| DATE II TO INT | SEC. | TWP. | RANGE | | CALLED OUT | ON LOCATION | JOB START | JOB FINISH |
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