

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: license # 5181
name DONALD C. SLAWSON
address 200 Douglas Building
City/State/Zip Wichita, Kansas 67202

Operator Contact Person Bill Horigan
Phone 316-263-3201

Contractor: license # 5657
name SLAWSON DRILLING CO., INC.

Wellsite Geologist Jim Gribj
Phone (316)267-6248

Designate Type of Completion

New Well Re-Entry Workover

Oil SWD Temp Abd
 Gas Inj Delayed Comp.
 Dry Other (Core, Water Supply etc.)

If OWWO: old well info as follows:

Operator
Well Name
Comp. Date Old Total Depth

WELL HISTORY

Drilling Method: Mud Rotary Air Rotary Cable

8-28-84 9-5-84 9-5-84
Spud Date Date Reached TD Completion Date

4450' 4450'
Total Depth PBDT

Amount of Surface Pipe Set and Cemented at 323 feet

Multiple Stage Cementing Collar Used? Yes No

If Yes, Show Depth Set feet

If alternate 2 completion, cement circulated
from feet depth to SX cmt

RECEIVED
STATE CORPORATION COMMISSION
OCT 05 1984
CONSERVATION DIVISION
Wichita, Kansas

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rules 82-3-130 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 drillers time log shall be attached with this form. 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 W. R. Horigan
Title Kansas Operations Manager Date 10-3-84

Subscribed and sworn to before me this 4th day of October 19 84.

Notary Public Angela A. Kendall
Date Commission Expires 9-18-88

ANGELA A. KENDALL
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 9-18-88

API NO. 15- 063-20,807-00-00

County Gove

W/2 W/2 NW Sec 1 Twp 13S Rge 28W X West
(location)

3960 Ft North from Southeast Corner of Section
4950 Ft West from Southeast Corner of Section
(Note: locate well in section plat below)

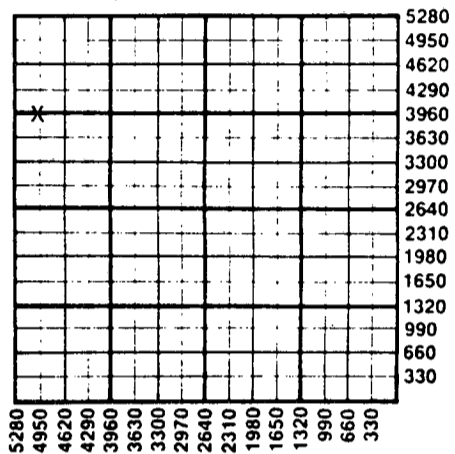
Lease Name Zimmerman '0' Well# 1

Field Name Wildcat

Producing Formation NA

Elevation: Ground 2603 KB 2609

Section Plat



WATER SUPPLY INFORMATION

Source of Water:

Division of Water Resources Permit #

Groundwater Ft North From Southeast Corner and
(Well) Ft. West From Southeast Corner of
Sec Twp Rge East West

Surface Water Ft North From Southeast Corner and
(Stream, Pond etc.) Ft West From Southeast Corner
Sec Twp Rge East West

Other (explain) _____
(purchased from city, R.W.D.#)

Disposition of Produced Water: Disposal Repressuring

Docket #

K.C.C. OFFICE USE ONLY

Letter of Confidentiality Attached
 Wireline Log Received
 Drillers Timelog Received

Distribution
 KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

Form ACO-1
(This form supercedes
previous forms
ACO-1 & C-10)

Sec. 1 Twp. 13S Rge. 28W