

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

API NO. 15- 101-217090000

County Lane

SW - NW - SW - Sec. 17 Twp. 16 Rge. 27 XX<sup>E</sup><sub>W</sub>

1650 Feet from S (circle one) Line of Section

330 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:  
NE, SE, NW or SW (circle one)

Lease Name Albin Well # 1

Field Name WC

Producing Formation Kansas City

Elevation: Ground 2691' KB 2696'

Total Depth 4600' PBTD \_\_\_\_\_

Amount of Surface Pipe Set and Cemented at 287' Feet

Multiple Stage Cementing Collar Used? X Yes \_\_\_\_\_ No

If yes, show depth set 2147' Feet

If Alternate II completion, cement circulated from 2147'

feet depth to surface w/ 4 5/8 sx cmt.

Drilling Fluid Management Plan ALT II 4-12-96  
(Data must be collected from the Reserve Pit) Li

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Dewatering 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. \_\_\_\_\_

Operator: License # 6039

Name: L. D. Drilling, Inc.

Address RR 1 Box 183 B

West 10th Street

City/State/Zip Great Bend, Ks 67530

Purchaser: National Cooperative Refinery Association

Operator Contact Person: L. D. Davis

Phone ( 316 ) 793-3051

Contractor: Name: L. D. Drilling, Inc

License: 6039

Wellsite Geologist: Kim Shoemaker

Designate Type of Completion  
XX New Well \_\_\_\_\_ Re-Entry \_\_\_\_\_ Workover

XX Oil \_\_\_\_\_ SWD \_\_\_\_\_ SLOW \_\_\_\_\_ Temp. Abd.

Gas \_\_\_\_\_ ENHR \_\_\_\_\_ SIGW \_\_\_\_\_

Dry \_\_\_\_\_ Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: \_\_\_\_\_

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

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

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

\_\_\_\_\_ Plug Back \_\_\_\_\_ PBTD

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

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

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

9-10-95 9-21-95 10-02-95

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 L. D. Davis L. D. Davis

Title President Date 1-11-96

Subscribed and sworn to before me this 11th day of January, 19 96.

Notary Public Bessie M. DeWerff

Date Commission Expires 5-20-97

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input type="checkbox"/>	Geologist Report Received
Distribution		
_____	KCC	_____ SWD/Rep
_____	KGS	_____ Plug
_____		_____ NGPA
_____		_____ Other
(Specify)		
RECEIVED		
STATE CORPORATION COMMISSION		

Form ACO-1 (7-91) 1996

JAN 11 1996

