

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

Operator: License # 6569

Name: Carmen Schmitt, Inc.

Address P.O. Box 47

City/State/Zip Great Bend, KS 67530

Purchaser: _____

Operator Contact Person: Carmen Schmitt

Phone (316) 793-5100

Contractor: Name: Duke Drilling Co., Inc.

License: 5929

Wellsite Geologist: _____

Designate Type of Completion

New Well Re-Entry Workover

Dil SWD SLOW Temp. Abd.

Gas ENHR SIGW

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

If Workover/Re-Entry: old well info as follows:

Operator: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

Deepening Re-perf. Conv. to Inj/SWD

Plug Back PSTD

Commingled Docket No. _____

Dual Completion Docket No. _____

Other (SWD or Inj?) Docket No. _____

04-02-92 04-07-92

Spud Date 04-02-92 Date Reached TD 04-07-92 Completion Date _____

API NO. 15- 165-21,604-00-00

County Rush

Approx. _____ E

SW - SE - NW - _____ Sec. 1 Twp. 17 Rge. 20 XX W

2970 Feet from S (circle one) Line of Section

1650 Feet from E (circle one) Line of Section

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

Lease Name House Well # 1

Field Name _____

Producing Formation _____

Elevation: Ground 2084 KB 2089

Total Depth 3890 PSTD _____

Amount of Surface Pipe Set and Cemented at 212 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 cnt.

Drilling Fluid Management Plan AIR DPA
(Data must be collected from the Reserve Pit)

Chloride content 45M ppm Fluid volume 1800 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. _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 200 Colorado Derby Building, 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-11f 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 Carmen Schmitt

Title President Date 4-20-92

Subscribed and sworn to before me this 20th day of April 1992

Notary Public H. L. Brann

Date Commission Expires _____



STATE CORPORATION COMMISSION RECEIVED APR 21 1992 K.C.C. OFFICE USE ONLY Letter of Confidentiality Attached Wireline Log Received Geologist Report Received Distribution KCC SVD/Rep NGPA GGS Plug Other (Specify)

Operator Name Carmen Schmitt, Inc. Lease Name House Well # 1

Sec. 1 Twp. 17 Rge. 20 East County Rush

East

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 Yes No
(Attach Additional Sheets.)

Samples Sent to Geological Survey Yes No

Cores Taken Yes No

Electric Log Run Yes No
(Submit Copy.)

List All E.Logs Run:

Log Name	Formation (Top), Depth and Datum		<input checked="" type="checkbox"/> Sample
	Top	Datum	
Anhydrite	1310 (+ 779)		
B/Anhydrite	1345 (+ 744)		
Topeka	3123 (-1034)		
Heebner	3426 (-1337)		
Lansing-Kansas City	3472 (-1383)		
Base Kansas City	3738 (-1649)		

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	12 1/2"	8-5/8"	20#	212'	60/40 poz	150	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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(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 Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water 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 Other (Specify) _____

Production Interval _____

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

ORIGINAL
 15-165-21604-00-00

Phone Plainville 913-434-2812
 Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC. 3078
 Home Office P. O. Box 31 Russell, Kansas 67665

New

DATE	4-9-92	Sec.	1	Twp.	17	Range	20	Called Out	5:00 pm	On Location	7:00 pm	Job Start	9:00 pm	Finish	10:45 pm
USE	House	Well No.	#1	Location	HARGRAVE - 2 1/2 W - 3 1/4			County	RUSH			State	KS		
Contractor	Duke #1														
Job	Rotary plug														
Well Size												T.D.			
8" Size												Depth	212		
12" Size												Depth			
18" Pipe												Depth			
24" Pipe												Depth			
Material Left in Csg.												Shoe Joint			
Case Max.												Minimum			
Case Line												Displace			

Owner
 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.

Charge To *CARMEN Schmitt*

Street

City _____ **State** _____

The above was done to satisfaction and supervision of owner agent or contractor.

Purchase Order No.

X *Lawrence Williamson*

CEMENT

Amount Ordered *205 5x 8, 6 1/4, 6 1/2 gal*

Consisting of

Common	
Poz. Mix	
Gel.	
Chloride	
Quickset	

Sales Tax

Handling

Mileage

Sub Total

Total

Thanks

EQUIPMENT

Operator	No.	Cementer	<i>Jack W.</i>
	<i>63</i>	Helper	
Operator	No.	Cementer	
		Helper	
		Driver	
Operator	<i>282</i>	Driver	<i>Jack S.</i>

DEPTH of Job

Reference:	<i>Dumphreys</i>
	<i>Mileage</i>

	Sub Total
	Tax
	Total

Remarks:

1st plug @ 1375' w/ 50 5x
2nd plug @ 800' w/ 80 5x
3rd plug @ 250' w/ 50 5x
4th plug @ 40' w/ 10 5x
and 15 5x in Rathole

STATE RECEIVED
 REGISTRATION COMMISSION
 REGISTRATION DIVISION
 Topeka, Kansas