

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

API NO. 15- 101-20,722 ⁰¹ 0002 **ORIGINAL**

County Lane
NE - NW - NW - Sec. 29 Twp. 16 Rge. 29 X ^E

Operator: License # 5285

4950 Feet from SW (circle one) Line of Section

Name: The Dane G. Hansen Trust

4290 Feet from EW (circle one) Line of Section

Address P. O. Box 187

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

City/State/Zip Logan, Kansas 67646

Lease Name Jennison 'A' Well # 1

Purchaser: N/A

Field Name Jennison

Operator Contact Person: Dane G. Bales

REPRESSURED
Producing Formation Cherokee

Phone (913) 689-4816

Elevation: Ground 2811 KB 2816

Contractor: Name: _____

Total Depth 4553 PBDT 4508

License: _____

Amount of Surface Pipe Set and Cemented at 342 Feet

Wellsite Geologist: None

Multiple Stage Cementing Collar Used? _____ Yes _____ No

Designate Type of Completion
____ New Well ____ Re-Entry X Workover

If yes, show depth set _____ Feet

____ Oil ____ SWD ____ SIOW ____ Temp. Abd.
____ Gas X ENHR ____ SIGW
____ Dry ____ Other (Core, WSW, Expl., Cathodic, etc)

If Alternate II completion, cement circulated from _____

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

feet depth to _____ w/ _____ sx cat.

Operator: The Dane G. Hansen Trust

Drilling Fluid Management Plan REWORK JK 2-3-97
(Data must be collected from the Reserve Pit)

Well Name: Jennison 'A' #1

Chloride content _____ ppm Fluid volume _____ bbls

Comp. Date 11/10/82 Old Total Depth 4553'

Dewatering method used _____

XX CEMENT SQUEEZE
____ Deepening ____ Re-perf. ____ Conv. to Inj/SWD
____ Plug Back ____ PBDT
____ Commingled ____ Docket No. _____
____ Dual Completion ____ Docket No. _____
____ Other (SWD or Inj?) Docket No. _____
8-6-95 8-9-95

Location of fluid disposal if hauled offsite: _____

8-6-95 Date of START OF WORKOVER Date Reached TD 8-9-95 Completion Date OF WORKOVER

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-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 Dane G. Bales
Title Manager Date 8/23/95

Subscribed and sworn to before me this 23 day of August, 19 95.

Notary Public Betty Jane Bittel
Betty Jane Bittel

Date Commission Expires July 17, 1996



1 copy to wife 8-2-1995

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received
Distribution
✓ KCC _____ SWD/Rep _____ NGPA
KGS _____ Plug _____ Other _____
(Specify)

SIDE TWO

Operator Name The Dane G. Hansen Trust Lease Name Jennison 'A' Well # 1

Sec. 29 Twp. 16 Rge. 29 East West County Lane

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.)

Log Formation (Top), Depth and Datum Sample
Name Top Datum

List All E.Logs Run:

CASING RECORD <input 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

ADDITIONAL CEMENTING/SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input checked="" type="checkbox"/> Perforate				
<input type="checkbox"/> Protect Casing	1075	Common Lite	50 200	3% CC
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone	1425	Common Lite	50 350	3% CC

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
3	1075		250 gal. 15% Mud; 500 gal. 15% INS/FE; 1000 gal. 28% INS/FE	4320-26
3	1425			

TUBING RECORD Size 2 3/8" Set At 3812' Packer At 3812' Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 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. Other (Specify)

Injection Interval
4200-4490
Completed
MAY 11 1968
4200-4490

ALLIED CEMENTING CO., INC.

3504

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

ORIGINAL

SERVICE POINT: Oakley

DATE <u>8-7-95</u>	SEC <u>29</u>	TWP. <u>16^s</u>	RANGE <u>29^w</u>	CALLED OUT	ON LOCATION <u>10:45 AM</u>	JOB START	JOB FINISH <u>5:45 PM</u>
LEASE <u>Jennison #</u>	WELL # <u>1</u>	LOCATION <u>23+4 Jct. 24-2N-16W</u>		COUNTY <u>Lane</u>	STATE <u>Kan</u>		

OLD OR NEW (Circle one)

CONTRACTOR Paul's Well Service

TYPE OF JOB Squeeze

HOLE SIZE _____ T.D. _____

CASING SIZE _____ DEPTH _____

TUBING SIZE _____ DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL X-Part DEPTH 1356'

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. 1425'

OWNER _____

CEMENT

AMOUNT ORDERED 350 SKS Lite
50 SKS Com, 3%CC

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

TOTAL _____

EQUIPMENT

PUMP TRUCK CEMENTER Walt

191 HELPER Terry

BULK TRUCK

303 DRIVER Dann

BULK TRUCK

282 DRIVER Steve

REMARKS:

Test Plug @ 2000 PSI, Held
Test Casing @ 1500 PSI, @ 1400', Held
Perf Casing 1425', took injection
rate: 2 BPM @ 800 PSI, mixed 350
SKS Lt., followed w/ 50 com, 3%CC
Squeezed @ 1000 PSI, cleared tubing,
pulled 2 Jts, put 500 PSI on squeeze
Held shut in the flow

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG _____ @ _____

_____ @ 10.2 - 1995

_____ @ _____

TOTAL _____

CHARGE TO: D.G. Hanson Trust

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

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 is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

SIGNATURE 

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

ALLIED CEMENTING CO., INC.

3508

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

ORIGINAL

SERVICE POINT:

Oakley

DATE <u>8-9-95</u>	SEC <u>29</u>	TWP. <u>16</u>	RANGE <u>29</u>	CALLED OUT	ON LOCATION <u>3:30 PM</u>	JOB START	JOB FINISH <u>6:00 PM</u>
LEASE <u>Jennison 'A'</u>	WELL # <u>1</u>	LOCATION <u>Healy 4E-2N-1/2W</u>			COUNTY <u>Lane</u>	STATE <u>Kan</u>	

OLD OR NEW (Circle one)

CONTRACTOR Pauls Well Service

TYPE OF JOB Squeeze

HOLE SIZE _____ T.D. _____

CASING SIZE 5 1/2 DEPTH _____

TUBING SIZE 2 1/2 DEPTH _____

DRILL PIPE _____ DEPTH _____

TOOL _____ DEPTH _____

PRES. MAX _____ MINIMUM _____

MEAS. LINE _____ SHOE JOINT _____

CEMENT LEFT IN CSG. _____

PERFS. 1075

OWNER Same

CEMENT _____

AMOUNT ORDERED 50 SKS com 3%CC

200 SKS Lite 3%CC

used 6

COMMON _____ @ _____

POZMIX _____ @ _____

GEL _____ @ _____

CHLORIDE _____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

HANDLING _____ @ _____

MILEAGE _____ @ _____

EQUIPMENT

PUMP TRUCK CEMENTER Walt

191 HELPER Terry

BULK TRUCK

240 DRIVER Bur

BULK TRUCK

_____ DRIVER _____

TOTAL _____

REMARKS:

Test Bottom Squeeze, @ 1500 PSI

Held, set Tool above Perfs, Tank rate;

2 BPM @ 900 PSI, mixed approx 150 SKS

Lite, 3%CC, shut off, squeezed to

1500, set for 30 min released it, cleared

Tubing, pulled 2 Jts, put 500 PSI on

shut in - OK

SERVICE

DEPTH OF JOB _____

PUMP TRUCK CHARGE _____

EXTRA FOOTAGE _____ @ _____

MILEAGE _____ @ _____

PLUG _____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

CHARGE TO: D. G. Hansen Trust

STREET _____

CITY _____ STATE _____ ZIP _____

FLOAT EQUIPMENT

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

_____ @ _____

TOTAL _____

TAX _____

TOTAL CHARGE _____

DISCOUNT _____ IF PAID IN 30 DAYS

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SIGNATURE 