

STATE CORPORATION COMMISSION OF KANSAS
OIL & GAS CONSERVATION DIVISION
RECOMPLETION FORM
ACQ-2 AMENDMENT TO WELL HISTORY

Operator: License # 5886
Name Chief Drilling Co., Inc.
Address 151 N. Main #700
Wichita, KS 67202
City/State/Zip

Purchaser Koch Oil Co.

Operator Contact Person F.W. Shelton, Jr.
Phone 316-262-3791

Designate Type of Original Completion

 X New Well Re-Entry Workover

<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> SWD	<input type="checkbox"/> Temp Abd
<input type="checkbox"/> Gas	<input type="checkbox"/> Inj	<input type="checkbox"/> Delayed Comp.
<input type="checkbox"/> Dry	<input type="checkbox"/> Other (Core, Water Supply etc.)	

Date of Original Completion: 9-11-84

DATE OF RECOMPLETION:

6-07-88	6-10-88
Commenced	Completed

Designate Type of Recompletion/Workover:

_____ Deepening _____ Delayed Completion

_____ Plug Back _____ Re-perforation

X Conversion to Injection/Disposal

Is recompleted production:

Commingled; Docket No.

Dual Completion; Docket No.

D-25,3430ther (Disposal or Injection)?

API NO. 15- 101-21,014-⁰¹~~008~~

County Lane

NW NE NW Sec 6 Twp 17S Rge 29 East
X West

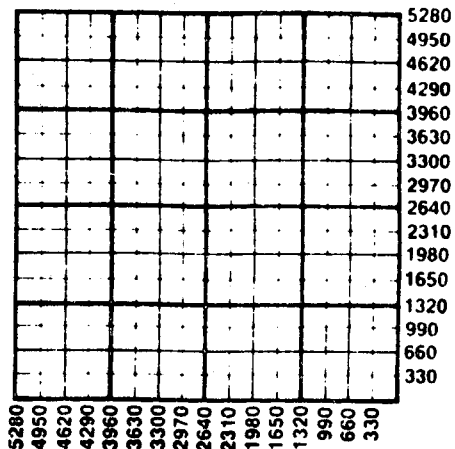
4950' Ft North from Southeast Corner of Section
3540' Ft West from Southeast Corner of Section
 (Note: Locate well in section plat below)

Lease Name SHAY Well # 3

Field Name Shay South

Name of New Formation Fort Scott

Elevation: Ground 2832 KB 2839
Section Plat



K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached

C Wireline Log Received

C Drillers Timelog Received

Distribution

✓ KCC ✓ SWD/Rep NGPA

☒ KGS ☐ Plug ☐ Other

(Specify)

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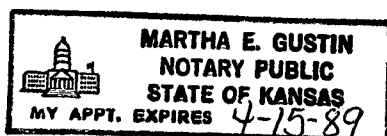
INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the recompletion of any well. Rules 82-3-107 and 82-3-141 apply. Information on side two of this form will be held confidential 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 any additional wireline logs and driller's time logs (not previously submitted) shall be attached with this form. Submit ACO-4 prior to or with this form for approval of commingling or dual completions. Submit CP-4 with all plugged wells. Submit CP-111 with all temporarily abandoned wells. NOTE: Conversion of wells to either disposal or injection must receive approval before use; submit form U-1.

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 F.W. Shelton, Jr. Title Vice President Date 7-22-88

Subscribed and sworn to before me this 22nd day of July, 19 88

Notary Public Martha E. Gustin Date Commission Expires 4-15-89
Martha E. Gustin



FORM AOO-2
5/88

SIDE TWO

Operator Name Chief Drilling Co., Inc. Lease Name SHAY Well # 3

Sec 6 Twp 17S Rge 29 x East
West County Lane

RECOMPLETED FORMATION DESCRIPTION:

X Log Sample

<u>Name</u>	<u>Top</u>	<u>Bottom</u>
CEDAR HILLS	1740	2035

ADDITIONAL CEMENTING/SQUEEZE RECORD				NONE
Purpose:	Depth	Type of Cement	# Sacks Used	Type & Percent Additives
NA	Top NA Bottom	NA	NA	NA
<u>Perforate</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>Protect Casing</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>Plug Back TD</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>
<u>Plug Off Zone</u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>

Shots Per Foot	PERFORATION RECORD	Acid, Fracture, Shof, Cement Squeeze Record (Amount and Kind of Material Used)
	Specify Footage of Each Interval Perforated	
1	1930-2000	None

PBTD 2050 Plug Type cast iron bridge plug

TUBING RECORD:

Size 2 3/8" Set At 1915 Packer At 1916 Was Liner Run? Y X N

Date of Resumed Production, Disposal or Injection 6-17-88

Estimated Production Per 24 Hours bbl/oil bbl/water
 MCF gas gas-oil ratio

APPROVED FOR RECORD
DATE: 6-17-88
BY: [Signature]