

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

ORIGINAL

API NO. 15- 007-01033-00-01

County BARBER

- SW - NE - NE Sec. 2 Twp. 31 Rge. 14 X W

4290 Feet from S (circle one) Line of Section

990 Feet from E (circle one) Line of Section

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

Lease Name Skinner Well # 2

Field Name Skinner

Producing Formation Orig. Mag. or Vio.

Elevation: Ground _____ KB 1687

Total Depth 4,621 PBD _____

Amount of Surface Pipe Set and Cemented at 900 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 cmt.

Drilling Fluid Management Plan ALT 1 12-8-92 RD
(Data must be collected from the Reserve Pit)

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 # 3399

Name: Farrar Pump & Supply Co., Inc.

Address P. O. Box 209

city/State/Zip Medicine Lodge, Ks. 67104

Purchaser: --

Operator Contact Person: Mike Farrar

Phone (316) 886-3763

Contractor: Name: Allen Drilling

License: #5418

Wellbore Geologist: Gordon W. Keen

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

_____ Oil _____ SWD _____ S10W _____ Temp. Abd.
_____ Gas _____ ENHR _____ S10G
X _____ Dry _____ Other (Core, MSW, Expl., Cathodic, etc)

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

Operator: Drillers Gas Co.

Well Name: #2 D. W. Skinner 'B'

Comp. Date 1/6/46 Old Total Depth 4,381'

X Deepening _____ Re-perf. _____ Conv. to Inj/SWD
_____ Plug Back _____ PBD
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) _____ Docket No. _____

8/7/92 8/16/92
Spud Date Date Reached TD Completion Date

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 _____

Title President Date 11-10-92

Subscribed and sworn to before me this 10th day of November, 1992

Notary Public Teresa L. Myers

Date Commission Expires 3-20-95



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)

NOV 12 1992

P1

SIDE TWO

Operator Name Farrar Pump & Supply Co., Inc.

Lease Name Skinner

Well # 2

Sec. 2 Twp. 31 Rge. 14

East
 West

County Barber

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: None

Name	Formation (Top), Depth and Datum		<input checked="" type="checkbox"/> Sample
	Top	Datum	
Simpson shale	4502	-2815	
Simpson sand	4517	-2830	
Arbuckle	4606	-2913	
DTD	4621		

CASING RECORD

New 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		8 5/8ths		900			
production		5 1/2		4374			
NOTE* All casing set & cemented by original operator							

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, SMD 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
<u>DRY</u>					

Disposition of Gas: Vented Sold Used on Lease
(If vented, submit ACO-18.)

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Other (Specify) _____

Production Interval

