

ORIGINAL

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

Operator: License # 9232

Name: Timberline Oil & Gas Corporation

Address 4447 S. Canyon Rd. Ste. 1
city/state/zip Rapid City, SD 57702

Purchaser: Kansas Gas Supply

Operator Contact Person: Brant C. Grote

Phone 605.) 341-3400

Contractor: Name: Basye Well Service

License: _____

Wellsite Geologist: _____

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

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

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

Operator: Timberline Oil & Gas Corporation

Well Name: Knop 10

Comp. Date 1/15/85 Old Total Depth 4480'

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

11/19/94 11/21/94
Spud Date OF START Date Reached TD Completion Date OF
OF WORKOVER WORKOVER

API NO. 15- 151-21,528000/

County Pratt

SE - SW - NE - ____ Sec. 2029 Twp. 26S Rge. 12 X W

2970 Feet from W (circle one) Line of Section

1650 Feet from W (circle one) Line of Section

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

Lease Name: Knop Well # 10

Field Name: Iuka Carmi

Producing Formation Toronto

Elevation: Ground 1922 XB 1933

Total Depth _____ PSTD _____

Amount of Surface Pipe Set and Cemented at 335 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 REWORK J 9/ 3-28-95
(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. _____

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 [Signature]

Title President Date 12/7/94

Subscribed and sworn to before me this 7th day of December, 19 94.

Notary Public Trudy K. Steiger

Date Commission Expires 2/30/96

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

Operator Name Timberline Oil & Gas Corporation Lease Name Knop Well # 10
 Sec. 29 Twp. 26S Rge. 12 East West County Pratt

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 Formation (Top), Depth and Datum Sample

Name	Top	Datum
Toronto	3523	-1590

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	12 1/4"	8 5/8"	24 #	335'	60/40 Poz	300	2% gel 3% CaCl ₂
Production	7 7/8"	5 1/2"	14 #	4479'	ASC	250	5% GILSONITE 0.75% FRA 40 BBLs OF DESCO FLUSH

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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
2	3523-29	1000 gal 15% HCL
3	4336'-4340'	
	PACKER @ 3604'	

TUBING RECORD Size 2 7/8 Set At 3604 Packer At 3604 Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 11-22-94 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	75	150		

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 3523'-3529'