

This form must be filed in triplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within five days after the completion of the well, regardless of how the well was completed. Circle one: Oil, gas, dry, SWD, OWWO, injection. Please type. Complete ALL sections. Applications must be filed for dual completion, commingling, salt water disposal and injection. Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.) KCC#-(316) 263-3238.

OPERATOR Chase Well Service, Inc. API NO. 15-135-22,205 0000

ADDRESS P. O. Box 355 COUNTY Ness County

Great Bend, Kansas 67530 FIELD _____

**CONTACT PERSON _____ LEASE Stutz

PHONE _____

PURCHASER _____ WELL NO. #3

ADDRESS _____ WELL LOCATION SW NW

_____ Ft. from _____ Line and

_____ Ft. from _____ Line of

DRILLING CONTRACTOR Strata Drilling, A Div. of the _____ SEC. 8 TWP. 17S RGE. 25W

ADDRESS BEREDCO INC

401 E. Douglas, Suite 402

Wichita, Kansas 67202

PLUGGING CONTRACTOR Halliburton

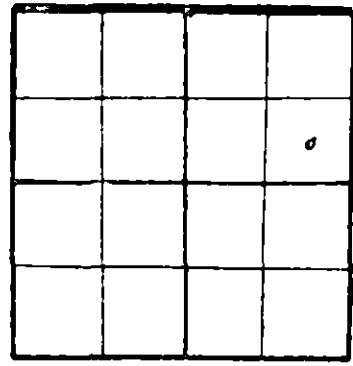
ADDRESS _____

TOTAL DEPTH 4466' PBD _____

SPUD DATE 2/26/82 DATE COMPLETED 3/5/82

ELEV: GR _____ DF _____ KB _____

DRILLED WITH ~~(CABLE)~~ (ROTARY) ~~(AIR)~~ TOOLS
Report of all strings set — surface, intermediate, production, etc. (New)/~~(Used)~~ casing.



WELL PLAT
(Quarter) or (Full) Section - Please indicate.

KCC _____
KGS _____
MISC. _____

Purpose of string	Size hole drilled	Size casing set (in O.D.)	Weight lbs/ft.	Setting depth	Type cement	Sacks	Type and percent additives
Surface	12 1/4"	8-5/8"	23#	275'	60-40 Pozmix	180	2% Gel, 3% CC

LINER RECORD			PERFORATION RECORD		
Top, ft.	Bottom, ft.	Sacks cement	Shots per ft.	Size & type	Depth interval

TUBING RECORD	
Size	Setting depth

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD	
Amount and kind of material used	Depth interval treated

TEST DATE: _____ PRODUCTION

Date of first production	Producing method (flowing, pumping, gas lift, etc.)	A.P.I. Gravity
RATE OF PRODUCTION PER 24 HOURS	Oil _____ bbls. Gas _____ MCF Water _____ bbls. Gas-oil ratio _____ CFPP	
Disposition of gas (vented, used on lease or sold)	Producing Interval(s):	

** The person who can be reached by phone regarding any questions concerning this information.
A witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Order Pool.

RECEIVED
STATE CORPORATION COMMISSION

JUN 28 1983

Total Rotary Depth 4466'

USE ADDITIONAL SHEETS, IF NECESSARY, TO COMPLETE WELL RECORD.

A F F I D A V I T

STATE OF _____, COUNTY OF _____ SS,

_____ OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH, DEPOSES AND SAYS:

THAT HE IS _____ FOR _____ OPERATOR OF THE _____ LEASE, AND IS DULY AUTHORIZED TO MAKE THIS AFFIDAVIT FOR AND ON BEHALF OF SAID OPERATOR, THAT WELL NO. _____ ON SAID LEASE HAS BEEN COMPLETED AS OF THE _____ DAY OF _____ 19____, AND THAT ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.

(S) _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ 19____

NOTARY PUBLIC

MY COMMISSION EXPIRES: _____

RECEIVED STATE CORPORATION COMMISSION

JUN 2 R 1983

CONSERVATION DIVISION Wichita, Kansas

Name of lowest fresh water producing stratum _____

Depth _____

Estimated height of cement blind pipe _____

WELL LOG

Show all important zones of porosity and contents thereof; cored intervals, and all drill-stem tests, including depth interval tested, cushion used, time test open, flowing and shut-in pressures, and recoveries.

SHOW GEOLOGICAL MARKERS, LOGS RUN, OR OTHER DESCRIPTIVE INFORMATION.

FORMATION DESCRIPTION, CONTENTS, ETC.	TOP	BOTTOM	NAME	DEPTH
Post rock	0	920'		
Shale, Sand-Blain	920'	1850'		
Shale & Lime	1850'	4210'		
Lime	4210'	4300'		
Lime & Shale	4300'	4466'		