

This form shall be filed in duplicate with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within ten days after the completion of the well, regardless of how the well was completed.

Attach separate letter of request if the information is to be held confidential. If confidential, only file one copy. Information on side one will be of public record and side two will then be held confidential.

Circle one: Oil, Gas, Dry, SWD, OWWO, Injection. Type and complete ALL sections.

Applications must be filed for dual completion, commingling, SWD and injection, T.A.

Attach wireline logs (i.e. electrical log, sonic log, gamma ray neutron log, etc.). KCC # (316) 263-3238. (Rules 82-2-105 & 82-2-125)

OPERATOR Howell - Pioneer Oil Co.

API NO. 15-121-24011 0000

ADDRESS 5013 Sycamore Drive

COUNTY Miami

Shawnee Mission, KS 66205

FIELD Paola-Rantoul

**CONTACT PERSON _____

PROD. FORMATION squirrel

PHONE _____

LEASE Ralph- Knadle

PURCHASER Square Deal Oil Co. Inc.

WELL NO. 4

ADDRESS P.O. BOX 883

WELL LOCATION SE 1/4 NW 1/4

Chanute, KS 66720

485 Ft. from N Line and

DRILLING Company Tools

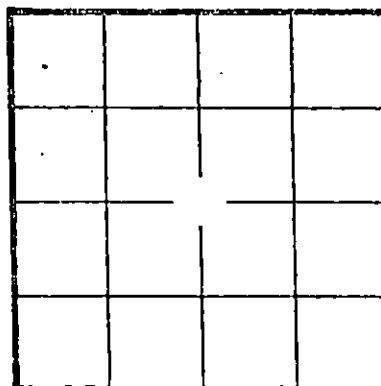
485 Ft. from E Line of

CONTRACTOR _____

ADDRESS _____

the SEC. 2 TWP. 18 RGE. 21

WELL PLAT



KCC _____
KGS _____
(Office
Use)

PLUGGING _____

CONTRACTOR _____

ADDRESS _____

TOTAL DEPTH 511 PBDT 511

SPUD DATE 7-11-82 DATE COMPLETED 8-23-82

ELEV: GR _____ DF _____ KB _____

DRILLED WITH (CABLE) (ROTARY) (AIR) TOOLS

Amount of surface pipe set and cemented 70 DV Tool Used? no

AFFIDAVIT

STATE OF Kansas, COUNTY OF Miami SS, I, _____

D. J. Gorges OF LAWFUL AGE, BEING FIRST DULY SWORN UPON HIS OATH,
Howell.

DEPOSES THAT HE IS secretary (FOR)(OF) Pioneer Oil Co.

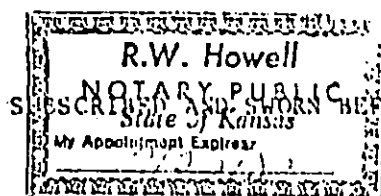
OPERATOR OF THE Ralph-Knadle LEASE, AND IS DULY AUTHORIZED TO MAKE

THIS AFFIDAVIT FOR AND ON THE BEHALF OF SAID OPERATOR, THAT WELL NO. 4 ON

SAID LEASE HAS BEEN COMPLETED AS OF THE 22 DAY OF August, 19 82, AND THAT

ALL INFORMATION ENTERED HEREIN WITH RESPECT TO SAID WELL IS TRUE AND CORRECT.

FURTHER AFFIANT SAITH NOT.



SUBSCRIBED AND SWORN BEFORE ME THIS _____ DAY OF _____, 19 _____.

(S) D. J. Gorges
R. W. Howell

MY COMMISSION EXPIRES: 1/1/83

NOTARY PUBLIC STATE CORPORATION COMMISSION
RECEIVED
NOV 10 1983
WICHITA DIVISION
Wichita, Kansas

**The person who can be reached by phone regarding any questions concerning information. Within 45 days of completion, a witnessed initial test by the Commission is required if the well produces more than 25 BOPD or is located in a Basic Oil Pool.

SIDE TWO

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 tool 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
Topsoil & Shale				20
Lime				32
Shale				51
Lime				62
Shale				99
Lime				115
Shale				126
Lime				154
Shale				163
Lime				186
Shale				191
Lime				201
Shale				336
Lime				343
Shale				355
Lime				374
Shale				419
Lime				429
Shale				438
Lime				343
Shale				355
Lime				374
Shale				419
Lime				429
Shale				438
Lime				440
Shale				456
Lime				462
Shale				481
Lime				489
Shale				493
Oil Sand				511

Report of all strings set — surface, intermediate, production, etc. CASING RECORD (New) or (Used)

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	10"	6 5/8	20.0	70	portland	25	
production	5 7/8	2 7/8	6.4	493	portland	75	

LINER RECORD

PERFORATION RECORD

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

TUBING RECORD

Size	Setting depth	Packer set at			
1"					

ACID, FRACTURE, SHOT, CEMENT SQUEEZE RECORD

Amount and kind of material used	Depth interval treated
140 bbl gelled water 40 sk 10-40 & 20 sk 12-30 sand	493-511

Date of first production 8-23-82	Producing method (flowing, pumping, gas lift, etc.) pumping	Gravity 29
RATE OF PRODUCTION PER 24 HOURS	Oil 1 bbls.	Gas MCF
Disposition of gas (vented, used on lease or sold)	Water %	Gas-oil ratio bbls. CFPD
	Perforations	

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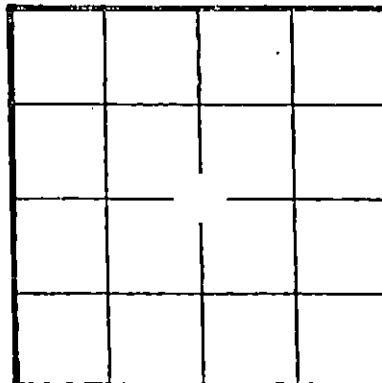
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WELL PLAT

PLUGGING _____

CONTRACTOR

ADDRESS _____



KCC _____
KCS _____
(Office
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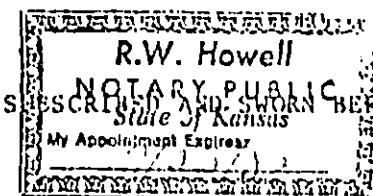
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Subscribed and sworn before me this _____ DAY OF _____, 19 _____.

(S) D. J. Gorges

NOTARY PUBLIC

MY COMMISSION EXPIRES: 12/31/85

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RECEIVED NOV 10 1983 STATE CORPORATION COMMISSION DIVISION, Kansas

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