

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

KCC

NOV 10

Operator: License # 9953  
 Name: HARRIS OIL & GAS COMPANY  
 Address 410 - 17th St., Suite 2310  
Denver, CO 80202  
 City/State/Zip

Purchaser: D & A  
 Operator Contact Person: BUID HARRIS  
 Phone ( 303 ) 623-3336

Contractor: Name: ALLEN DRILLING COMPANY  
 License: 5418  
 Wellsite Geologist: DAM SOMMER

Designate Type of Completion  
 New Well  Re-Entry  Workover  
 Oil  SWD  SIOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-Entry: old well info as follows:  
 Operator: N/A  
 Well Name: \_\_\_\_\_  
 Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_  
 Deepening  Re-perf.  Conv. to Inj/SWD  
 Plug Back  PBTD  
 Commingled  Docket No. \_\_\_\_\_  
 Dual Completion  Docket No. \_\_\_\_\_  
 Other (SWD or Inj?)  Docket No. \_\_\_\_\_  
10/19/93 10/29/93 11/01/93  
 Spud Date Date Reached TD Completion Date

API NO. 15- 175-21,347 **CONFIDENTIAL**  
 County Seward  
C - SW - SE Sec. 36 Twp. 33S Rge. 34  E

660 Feet from S/W (circle one) Line of Section  
1980 Feet from E/W (circle one) Line of Section  
 Footages Calculated from Nearest Outside Section Corner:  
 NE, SE, NW or SW (circle one)

Lease Name SCHMIDT Well # 1-36  
 Field Name ADAMSON

Producing Formation D & A  
 Elevation: Ground 2892' KB 2906'  
 Total Depth 6700' PBTD ---

Amount of Surface Pipe Set and Cemented at 1638 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  
 (Data must be collected from the Reserve Pit)  
 Chloride content 5000 ppm Fluid volume 2500 bbls  
 Dewatering method used CUT WINDOWS IN WALL TO AID  
IN NATURAL DEWATERING /EVAPORATION  
 Location of fluid disposal if hauled offsite:

**RELEASED**

Operator Name \_\_\_\_\_  
 Lease Name DEC 2 1994  
 Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W \_\_\_\_\_  
 County \_\_\_\_\_ Docket No. \_\_\_\_\_

**FROM CONFIDENTIAL**

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 W.G. Harris  
 Title PRESIDENT Date 11-10-93  
 Subscribed and sworn to before me this 10TH day of NOVEMBER, 19 93.  
 Notary Public ALICE E. BERRY  
 Date Commission Expires NOVEMBER 23, 1995

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

SCHMITT

Operator Name HARRIS OIL & GAS COMPANY

Lease Name SCHMIDT

Well # 1-36

Sec. 36 Twp. 33 Rge. 34

East  
 West

County Seward

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 (Attach Additional Sheets.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HEEBNER	4319	-1413
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	LANSING	4448	-1542
List All E.Logs Run:		CHECKERBOARD	5008	-2102
		MARMATON	5180	-2274
		ATOKA	5496	-2590
		MORROW	5804	-2898
		LWR MORROW	6036	-3130
		CHESTER	6108	-3202
		ST. GENEVIEVE	6500	-3594
		ST. LOUIS	6550	-3644

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#	1638'	PP Lite PP	535 150	2% cc # FC/sk

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	N/A			
<input type="checkbox"/> Plug Back TD				
<input type="checkbox"/> Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
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Date of First, Resumed Production, SWD or Inj.	Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)
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Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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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



JOB LOG FORM 2013 R-4

CUSTOMER		WELL NO.		LEASE		JOB TYPE		TICKET NO.	
HARRIS OIL & GAS		1-36		SEMIAT		8 3/8 SURFACE		579182	
CHART NO.	TIME #	RATE (BPM)	VOLUME (BBL) (GAL)	PUMPS		PRESSURE (PSI)		DESCRIPTION OF OPERATION AND MATERIALS	
				T	C	TUBING	CASING		
	0430								ORIGINAL
	0645								Called - Requested - now
	1015								DO LOCATION - Rig up - Well
	1030								TD - Circulate
	1130								T.O.V. KCC
	1200								Rig up Cases NOV 10
	1330								Run 8 3/8 casing CONFIDENTIAL
	1340								Assemble in. Hook up to Mud Pump
	1355								Here Circulate. SAFETY M16
	1400	6	200		✓		200		Start Down Mud Pump. Hook up to Cut Line
	1430	5	35		✓		200		Pump Lead Surry @ 12.2 # - Good Return
	1435								Pump Thr Surry @ 14.8 # - " "
	1437	5			✓		504		Surry in. Start Down to Drop Top Per
	1457	5.2	72		✓		504/150		Displace w/ H <sub>2</sub> O - Good Return
	1500		101		✓		500/100		Start Down. Rotate Pans. Front
									Received From Location
									* Circulate Cut To Surface

CONSERVATION DIVISION  
 RECEIVED  
 NOV 12 1993  
 STATE CORPORATION COMMISSION

RELEASED  
 DEC 22 1994  
 FROM CONFIDENTIAL



CHARGE TO: HARRIS OIL & GAS

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP CODE: \_\_\_\_\_

COPY

TICKET

No. 549183 - 8

PAGE 1 OF 1

FORM 1908 R-12

1. SERVICE LOCATIONS <u>25536</u>	WELL/PROJECT NO. <u>1-36</u>	LEASE <u>SCHMIAT</u>	COUNTY/PARISH <u>SEWARD</u>	STATE <u>Ks</u>	CITY/OFFSHORE LOCATION	DATE <u>10-20-93</u>	OWNER <u>SAME</u>
2. <u>25535</u>	TICKET TYPE <input checked="" type="checkbox"/> SERVICE <input type="checkbox"/> SALES	NITROGEN JOB? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	CONTRACTOR <u>AUGEN DRILLING</u>	RIG NAME/NO.	SHIPPED VIA <u>TRUCK</u>	DELIVERED TO <u>LOCATION</u>	ORDER NO.
3.	WELL TYPE <u>01</u>	WELL CATEGORY <u>01</u>	JOB PURPOSE <u>010</u>	WELL PERMIT NO.	WELL LOCATION		
4. REFERRAL LOCATION	INVOICE INSTRUCTIONS						

PRICE REFERENCE	SECONDARY REFERENCE/ PART NUMBER	ACCOUNTING			TIME	DESCRIPTION	QTY.	U/M	QTY.	U/M	UNIT PRICE	AMOUNT
		LOG	ACCT	DF								
<u>000-117</u>		<u>1</u>				<u>MILEAGE</u>	<u>20</u>	<u>MI</u>	<u>2</u>	<u>EA</u>	<u>2.75</u>	<u>55.00</u>
<u>001-016</u>	<u>KOC</u>					<u>PUMPING SERVICE</u>	<u>6</u>	<u>HR</u>				<u>1720.00</u>
<u>020-018</u>	<u>NOV 10</u>					<u>5" W TOP PLUG</u>	<u>1</u>	<u>EA</u>	<u>85.00</u>			<u>130.00</u>
<u>12A</u>	<u>825.217</u>					<u>GUIDE SHOE</u>	<u>1</u>	<u>EA</u>	<u>85.00</u>			<u>216.00</u>
<u>21A</u>	<u>815.19512</u>					<u>INSERT</u>	<u>1</u>	<u>EA</u>				<u>171.00</u>
<u>27</u>	<u>815.19415</u>					<u>FILLUP</u>	<u>1</u>	<u>EA</u>				<u>55.00</u>
<u>40</u>	<u>807.93059</u>					<u>CENTRALIZERS</u>	<u>3</u>	<u>EA</u>			<u>72.00</u>	<u>216.00</u>
<u>320</u>	<u>800.8888</u>					<u>BASKET</u>	<u>1</u>	<u>EA</u>				<u>122.00</u>
<u>350</u>	<u>810.10002</u>					<u>TOOLBOX</u>	<u>1</u>	<u>EA</u>				<u>122.00</u>

<b>LEGAL TERMS:</b> Customer hereby acknowledges and agrees to the terms and conditions on the reverse side hereof which include, but are not limited to, <b>PAYMENT, RELEASE, INDEMNITY, and LIMITED WARRANTY</b> provisions. CUSTOMER OR CUSTOMER'S AGENT SIGNATURE <u>X</u> <u>H. Pauli</u> DATE SIGNED <u>10-20-93</u> TIME SIGNED <u>0830</u>	SUB SURFACE SAFETY VALVE WAS: <input type="checkbox"/> PULLED & RETURN <input type="checkbox"/> PULLED <input type="checkbox"/> RUN		<b>SURVEY</b> AGREE UN-DECIDED DIS-AGREE			PAGE TOTAL <u>2185.00</u>  FROM CONTINUATION PAGE(S) <u>8307.30</u>  SUB-TOTAL APPLICABLE TAXES WILL BE ADDED ON INVOICE <u>12,472.30</u>
	TYPE LOCK	DEPTH	OUR EQUIPMENT PERFORMED WITHOUT BREAKDOWN?			
	BEAN SIZE	SPACERS	WE UNDERSTOOD AND MET YOUR NEEDS?			
	TYPE OF EQUALIZING SUB.	CASING PRESSURE	OUR SERVICE WAS PERFORMED WITHOUT DELAY?			
	TUBING SIZE	TUBING PRESSURE	WELL DEPTH	WE OPERATED THE EQUIPMENT AND PERFORMED JOB CALCULATIONS SATISFACTORILY?		
	TREE CONNECTION	TYPE VALVE		ARE YOU SATISFIED WITH OUR SERVICE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<input type="checkbox"/> do <input type="checkbox"/> do not require IPC (Instrument Protection). <input type="checkbox"/> Not offered		<input type="checkbox"/> CUSTOMER DID NOT WISH TO RESPOND				

**CUSTOMER ACCEPTANCE OF MATERIALS AND SERVICES** The customer hereby acknowledges receipt of the materials and services listed on this ticket

CUSTOMER OR CUSTOMER'S AGENT (PLEASE PRINT) <u>H. Pauli</u>	CUSTOMER OR CUSTOMER'S AGENT (SIGNATURE) <u>X H. Pauli</u>	HALLIBURTON OPERATOR/ENGINEER <u>Ken [Signature]</u>	EMP # <u>01373</u>	HALLIBURTON APPROVAL
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CONFIDENTIAL

CONFIDENTIAL

FROM CONFIDENTIAL

RELEASED

DEC 2 2 1994

WELL DATA

FIELD \_\_\_\_\_ SEC \_\_\_\_\_ TWP \_\_\_\_\_ RNG \_\_\_\_\_ COUNTY SEWARD STATE Ks

FORMATION NAME CONCRETE TIE TYPE TIE

FORMATION THICKNESS FROM \_\_\_\_\_ TO \_\_\_\_\_

INITIAL PROD. OIL \_\_\_\_\_ BPD. WATER \_\_\_\_\_ BPD. GAS \_\_\_\_\_ MCFD

PRESENT PROD. OIL \_\_\_\_\_ BPD. WATER \_\_\_\_\_ BPD. GAS \_\_\_\_\_ MCFD

COMPLETION DATE \_\_\_\_\_ MUD TYPE \_\_\_\_\_ MUD WT. \_\_\_\_\_

PACKER TYPE \_\_\_\_\_ SET AT \_\_\_\_\_

BOTTOM HOLE TEMP. \_\_\_\_\_ PRESSURE \_\_\_\_\_

MISC. DATA \_\_\_\_\_ TOTAL DEPTH \_\_\_\_\_

	NEW USED	WEIGHT	SIZE	FROM	TO	MAXIMUM PSI ALLOWABLE
CASING	N	24	8 7/8	KB	11.38	
LINER						
TUBING						
OPEN HOLE			12 1/4	KR	11.43	SHOTS/FT.
PERFORATIONS						
PERFORATIONS						
PERFORATIONS						

JOB DATA

TOOLS AND ACCESSORIES

TYPE AND SIZE	QTY.	MAKE
FLOAT COLLAR INSERT W/F 8 7/8	1	WESCO
FLOAT SHOE		
GUIDE SHOE R 1/2	1	KCC
CENTRALIZERS S-4	3	
BOTTOM PLUG		
TOP PLUG S-W	1	
HEAD BASKET	1	
PACKER		
OTHER WESCO A	1	

DATE 10-20 TIME 0430

ON LOCATION DATE 10-20 TIME 0645

JOB STARTED DATE 10-20 TIME 1330

JOB COMPLETED DATE 10-20 TIME 1550

PERSONNEL AND SERVICE UNITS

NAME	UNIT NO. & TYPE	LOCATION
KISSINGER C 1592	38742	SEWARD
WILLIAMS D 4101	75476	"
MAEW F 4549	4934	SEWARD
DAVIS F 4550	75505	"

MATERIALS

TREAT. FLUID \_\_\_\_\_ DENSITY \_\_\_\_\_ LB./GAL. °API

DISPL. FLUID \_\_\_\_\_ DENSITY \_\_\_\_\_ LB./GAL. °API

PROP. TYPE \_\_\_\_\_ SIZE \_\_\_\_\_ LB.

PROP. TYPE \_\_\_\_\_ SIZE \_\_\_\_\_ LB.

ACID TYPE \_\_\_\_\_ GAL. \_\_\_\_\_ %

ACID TYPE \_\_\_\_\_ GAL. \_\_\_\_\_ %

ACID TYPE \_\_\_\_\_ GAL. \_\_\_\_\_ %

SURFACTANT TYPE \_\_\_\_\_ GAL. \_\_\_\_\_ IN

NE AGENT TYPE \_\_\_\_\_ GAL. \_\_\_\_\_ IN

FLUID LOSS ADD. TYPE \_\_\_\_\_ GAL.-LB. \_\_\_\_\_ IN

GELLING AGENT TYPE \_\_\_\_\_ GAL.-LB. \_\_\_\_\_ IN

FRIC. RED. AGENT TYPE \_\_\_\_\_ GAL.-LB. \_\_\_\_\_ IN

BREAKER TYPE \_\_\_\_\_ GAL.-LB. \_\_\_\_\_ IN

BLOCKING AGENT TYPE \_\_\_\_\_ GAL.-LB. \_\_\_\_\_ IN

PERFPAC BALLS TYPE \_\_\_\_\_ QTY. \_\_\_\_\_

OTHER \_\_\_\_\_

OTHER \_\_\_\_\_

DEPARTMENT 5001

DESCRIPTION OF JOB PUT 8 7/8 Casing

JOB DONE THRU: TUBING  CASING  ANNULUS  TBG/ANN.

CUSTOMER REPRESENTATIVE X H. Frank

HALLIBURTON OPERATOR Richard

COPIES REQUESTED \_\_\_\_\_

CEMENT DATA

STAGE	NUMBER OF SACKS	CEMENT	BRAND	BULK SACKED	ADDITIVES	YIELD CU.FT./SK.	MIXED LBS./GAL.
1	535	PREMIX		3	2% M - 4H FIDCOLL	2.1	12.2
2	150	PREMIX		3	2% M - 4H FIDCOLL	1.32	14.3

PRESSURES IN PSI

SUMMARY

VOLUMES

CIRCULATING \_\_\_\_\_ DISPLACEMENT \_\_\_\_\_

BREAKDOWN \_\_\_\_\_ MAXIMUM \_\_\_\_\_

AVERAGE \_\_\_\_\_ FRACTURE GRADIENT \_\_\_\_\_

SHUT-IN: INSTANT \_\_\_\_\_ 5-MIN \_\_\_\_\_ 15-MIN \_\_\_\_\_

HYDRAULIC HORSEPOWER \_\_\_\_\_

ORDERED \_\_\_\_\_ AVAILABLE \_\_\_\_\_ USED \_\_\_\_\_

AVERAGE RATES IN BPM \_\_\_\_\_

TREATING \_\_\_\_\_ DISPL. \_\_\_\_\_ OVERALL \_\_\_\_\_

CEMENT LEFT IN PIPE \_\_\_\_\_

FEET 43.5 REASON SILVER TIE

PRESLUSH: BBL.-GAL. \_\_\_\_\_ TYPE \_\_\_\_\_

LOAD & BKDN: BBL.-GAL. \_\_\_\_\_ PAD: BBL.-GAL. \_\_\_\_\_

TREATMENT: BBL.-GAL. \_\_\_\_\_ DISPL.: BBL.-GAL. 101.5

CEMENT SLURRY: BBL.-GAL. 235

TOTAL VOLUME: BBL.-GAL. \_\_\_\_\_

RAMARKS 1. J. Frank to T. K. K. K.

CUSTOMER: MAKERS OIL & GAS

LEASE: SEWARD

WELL NO: 1-516

JOB TYPE: 8 7/8

DATE: 10-20-93

