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KANSAS CORPORATION COMMISSION
OIL & GAS CONSERVATION DIVISIONForm ACO-1
September 1999
Form Must Be TypedWELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

ORIGINAL

Operator: License # 32638
 Name: Nadel and Gussman, L.L.C.
 Address: 3200 First Place Tower
 City/State/Zip: Tulsa, OK 74103
 Purchaser: El Paso
 Operator Contact Person: John May
 Phone: (918) 697-2137
 Contractor: Name: _____
 License: _____
 Wellsite Geologist: NONE
 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: Nadel and Gussman, L.L.C.
 Well Name: Ramsey 1-5
 Original Comp. Date: 10/9/54 Original Total Depth: 3385'
 _____ Deepening XXX Re-perf. _____ Conv. to Enhr./SWD
 _____ Plug Back _____ Plug Back Total Depth
X Commingled _____ Docket No. _____
 _____ Dual Completion _____ Docket No. _____
 _____ Other (SWD or Enhr.?) _____ Docket No. _____
8/31/01 9-21-01
~~DATE~~ Date of **START** Date Reached TD Completion Date of
OF WORKOVER **WORKOVER**

API No. 15 - NA 15-129-10367-0001
 County: Morton
NE NE SW Sec. 5 Twp. 33 S. R. 42 ☐ East ☒ West
2310 feet from (S) N (circle one) Line of Section
2310 feet from E (W) (circle one) Line of Section
 Footages Calculated from Nearest Outside Section Corner:
 (circle one) NE SE NW SW
 Lease Name: Ramsey Well #: 1-5
 Field Name: Greenwood
 Producing Formation: Topeka
 Elevation: Ground: 3523' Kelly Bushing: 3525'
 Total Depth: 3385' Plug Back Total Depth: 3350'
 Amount of Surface Pipe Set and Cemented at 600 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 9/21 01/15/02
 (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. R. _____ ☐ East ☐ West
 County: _____ Docket No.: _____

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 130 S. Market - Room 2078, 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 of 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: James P. Nadel
 Title: Manager of Production Date: 10/1/01
 Subscribed and sworn to before me this 10th day of October
2001
 Notary Public: Kathy Garrow
 Date Commission Expires: 8-1-03

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_____ Letter of Confidentiality Attached
 If Denied, Yes ☐ Date: _____
 _____ Wireline Log Received
 _____ Geologist Report Received
 _____ UIC Distribution

KCC

X

Operator Name: Nadel and Gussman, L.L.C. Lease Name: Ramsey Well #: 1-5
 Sec. 5 Twp. 33 S. R. 42 ☐ East ☒ West County: Morton

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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

| CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> 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 | # Sacs Used | Type and Percent Additives |
| Surface | 12 3/4" | 8" | | 600' | | | |
| Production | 7 7/8" | 5" | | 3379' | | | |
| | | | | | | | |

| 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 Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used) | Depth | |
|--|---|---|---|--|
| 4 | 2730-2737', 2691-2693', 2681-2684' | Acidize 1500 gals 15% HCL Frac w/14,000# 16/30, 70 Q N2 | | |
| 4 | 2672-2678' | | | |
| OLD ← | 3266'- 3272' + 3255'- 3260' + 3240'- 3245' + | | | |
| | 3220'- 3233' + 3200'- 3210' | | | |
| | 3111'- 3120' + 3068'- 3085' + 3045'- 3064' | | | |
| TUBING RECORD | Size 2-3/8" | Set At 3175 | Packer At NA | Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Date of First, Resumerd Production, SWD or Enhr. | | | Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain) | |
| Estimated Production Per 24 Hours | Oil Bbls. N/A | Gas Mcf 350 | Water Bbls. | Gas-Oil Ratio Gravity |

Disposition of Gas METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Solid ☐ Used on Lease
 (If vented, Sumit ACO-18.)

☐ Open Hole ☒ Perf. ☐ Dually Comp. ☒ Commingled
☐ Other (Specify)