

COPY

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

API NO. 15- 191-222530000

County SUMNER

N/2-N/2 Sec. 22 Twp. 34 Rng. 3 X W

Operator: License # 6412

660 Feet from S (circle one) Line of Section

Name: Sid Tomlinson

2580 Feet from E (circle one) Line of Section

Address 424 NW 42

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

Oklahoma City, OK 73118

Lease Name SCHMIDT Well # 1

City/State/Zip _____

Field Name _____

Purchaser: _____

Producing Formation _____

Operator Contact Person: Sid Tomlinson

Elevation: Ground 1204 KB 1211

Phone (405) 521-1852

Total Depth 5500 PBYD 5500

Contractor: Name: Patriot Drilling, Inc.

Amount of Surface Pipe Set and Cemented at 727 Feet

License: 31736

Multiple Stage Cementing Collar Used? Yes X No

Wellsite Geologist: Harold Trapp

If yes, show depth set _____ Feet

Designate Type of Completion

If Alternate II completion, cement circulated from _____

X New Well _____ Re-Entry _____ Workover _____

feet depth to _____ w/ _____ sx cnt.

Oil _____ SWD _____ S10W X Temp. Abd.
Gas _____ ENHR _____ S16W
X Dry _____ Other (Core, WSW, Expl., Cathodic, etc)

Drilling Fluid Management Plan D+A H-3-96
(Data must be collected from the Reserve Pit)

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

Chloride content 11,000 ppm Fluid volume 750 bbls

Operator: _____

Dewatering method used evaporation

Well Name: _____

Location of fluid disposal if hauled offsite: _____

Comp. Date _____ Old Total Depth RECEIVED

Deepening _____ Re-perf. _____ Conv. to Inj/SWD _____
Plug Back _____ PBYD _____
Completed _____ Docket No. JAN 02 1996
Dual Completion _____ Docket No. 1-12-96
Other (SWD or Inj?) Docket No. _____

8-22-95 9-8-95 12-22-95
Spud Date Date Reached TD Completion Date

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 Sid Tomlinson

Title OPERATOR

Date 12/28/95

Subscribed and sworn to before me this 28 day of Dec 19 95.

Notary Public Walter A Cole

Date Commission Expires 5-24-96

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/>	Letter of Confidentiality Attached
C	<input checked="" type="checkbox"/>	Wireline Log Received
C	<input checked="" type="checkbox"/>	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"/>		<input type="checkbox"/> NGPA
		<input type="checkbox"/> Other (Specify)

SIDE TWO

Operator Name SID TOMLINSON Lease Name SCHMIDT Well # 1
 Sec. 22 Twp. 34 Rge. 3 East West
 County Sumner

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Topeka	2428	-1217
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Heebner	2820	-1609
List All E.Logs Run:		Kansas City	3610	-2399
Dual Induction Laterlog,		Mississippian	4310	-3099
Neutron/Density, Microlog,		Simpson	4743	-3532
Cement bond log.		Arbuckle	4936	-3725
		TD	5500	
		DST#1 4748-66(Simpson) 30/30/30/30		
		Rec. 270' gas and oil cut watery mud,		
		1680' gas cut salt water.		
		FP 585/919 SIP 1738/1725		

CASING RECORD <input type="checkbox"/> New <input checked="" 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	# Sacks Used	Type and Percent Additives
Surface	13 1/2	10 3/4	32	727	65/35 Poz	200	6% gel,
				plus	common	100	3% CC
production	9 3/8	7	20&23	5006	ASC	200	5# gilsonite

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				

RECEIVED
KCC DISTRICT #2
OCT 02 1996
WICHITA, KS

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
1 shot/2 ft.	4536-58, 4586-4608, 4630-52	3000 gals 15% acid, frad with 3000 bbls fresh water.	
4	4312-17, 4342-47	500 gals 15% acid	
4	4742-46, 4751-53, 4849-51, 4869-72	750 gals 15% acid	

TUBING RECORD		Size <u>2 3/8</u> Set At <u>4430'</u> Packer At <u>_____</u>	Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj.		Producing Method <input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)	
Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls. Gas-Oil Ratio Gravity

Disposition of Gas:	METHOD OF COMPLETION	Production Interval
<input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease (If vented, submit ACO-18.)	<input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <input type="checkbox"/> Other (Specify) _____	_____