

15-095-01106-00-01

ORIGINAL

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

Operator: License # 8740

Name: Bramwell Petroleum, Inc.

Address 15183 SW 25 Ave

Spivey, KS 67142-9074

City/State/Zip

Purchaser: N/A

Operator Contact Persons: Don Bramwell

Phone (316) 532-2770

Contractor: Name: Company tools

License:

Wellsite Geologist: N/A

Conversion of producing well to
Designate Type of Completion injection well

New Well Re-Entry Workover

Oil SVD SIGW Temp. Abd.
Gas EXHR SIGW
Dry Other (Core, WSW, Expl., Cathodic, etc)

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

Operator: DRILLING & EXPLORATION

Well Name: KOHLMAN #1

Comp. Date 5-6-60 Old Total Depth 4571'

Deepening Re-perf. Conv. to GWD
Plug Back PSTD
Commingled Docket No. _____
Dual Completion Docket No. _____
 Other (n) Docket No. E-27197

6-14-96 Date OF START OF WORKOVER
6-16-96 Date Reached TD
Completion Date OF WORKOVER

API NO. 15- Prior to 1967

County Kingman

NE-SE NW - Sec. 7 Twp. 30S Rge. 7 E W

3630 Feet from W (circle one) Line of Section

2970 Feet from W (circle one) Line of Section

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

Lease Name Kohman Well # 1

Field Name Spivey Grabs

REPRESSURED
Reservoir Formation Mississippi

Elevation: Ground 1491 KB 1498

Total Depth 4571 PSTD 4225

Amount of Surface Pipe Set and Cemented at 270 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 cat.

Drilling Fluid Management Plan REWORK JN 6-20-96
(Data must be collected from the Reserve Pit)

Spivey Grabs
Chloride content N/A ppm Fluid volume _____ bbls

Dewatering method used Mississippi RECEIVED
KANSAS CORPORATION COMMISSION

Location of fluid disposal if hauled offsite:
4571

Operator Name 6-19-1996

Lease Name _____ CONSERVATION DIVISION
WICHITA, KS

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 Don Bramwell

Title President Date 06-17-96

Subscribed and sworn to before me this 17 day of June 19 96.

Notary Public Patricia A. Bramwell

Date Commission Expires 2-18-98

Patricia A. Bramwell
NOTARY PUBLIC
STATE OF KANSAS
My Appl. Exp. _____

E.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 XCC SVD/Rep NEPA
 KCS Plug Other (Specify)

SIDE TWO

Operator Name Bramwell Petroleum, Inc

Lease Name Kohman

Well # 1

County Kingman

305
Soc. 7 Top. 7 Rge. 7

East

West

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.

N/A

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:

N/A

Log Formation (Top), Depth and Datum Sample

Name Top Datum

CASING RECORD <input checked="" 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	# Sacks Used	Type and Percent Additives
Surface csg	12 1/4	8 5/8	32	270	Common	225	Unk
Production	6 3/4	4 1/2	9 1/2	4260	Common	80	Unk

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	4156-4164	

TUBING RECORD

Size 2 3/8 Set At 4129 Packer At 4097 Liner Run Yes No

Date of First, Resumed Production, SWD or Inj. 06-17-96 Producing Method Flowing Pumping Gas Lift Injection Other (Explain) 1st injection

Estimated Production Per 24 Hours injection Oil Sbls. 105 Gas Sbls. 105 Gas-Oil Ratio 105 Gravity 105

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-18.) N/A

METHOD OF COMPLETION Open Hole Perf. Dually Comp. Commingled Injection Other (Specify) Production Interval 4156-4164