

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

Operator: License # 5004

Name: Vincent Oil Corporation

Address: 100 No. Main, Suite 500

Wichita, Kansas

City/State/Zip 67202-1308

Purchaser: Kansas Gas Supply

Operator Contact Person: Richard A. Hiebsch

Phone (316) 262-3573

Contractor: Name: _____

License: _____

Wellsite Geologist: None

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: Vincent Oil Corporation

Well Name: Unruh #1

Comp. Date 5-7-85 Old Total Depth 4945'

Deepening Re-perf. Conv. to Inj/SWD
 Plug Back 4700 PBDT
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____

7-30-94 8-3-94
Date of START Date Reached TD Completion Date of
OF WORKOVER OF WORKOVER

API NO. 15- 097-20,966000/

County Kiowa

C N/2 NW SE Sec. 22 Twp. 29 Rge. 18 E W

2310
330 Feet from S (circle one) Line of Section

1980 Feet from E (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:
 SE SW or SA (circle one)

Lease Name Unruh Well # 1

Field Name Nichols

Producing Formation Lansing-Kansas City

Elevation: Ground _____ KB

Total Depth 4945' PBDT _____

Amount of Surface Pipe Set and Cemented at _____ 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. cnt.

Drilling Fluid Management Plan REWORK 894 2-1-95
(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 _____

Quarter _____ Sec. _____ Twp. _____

County _____ Docket No. _____

ORIGINAL

STATE CORPORATION COMMISSION RECEIVED
AUG 1 1994
RESERVE WIC

INSTRUCTIONS: An original and two copies of this form shall be filed with the Kansas Corporation Commission, 1000 E. 12th St., 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 Richard A. Hiebsch
Richard A. Hiebsch
Title Vice President Date 8-15-94

Subscribed and sworn to before me this 15th day of August,
19 94
Notary Public Julie K. Stout
Julie K. Stout

Date Commission Expires July 23, 1997
JULIE K. STOUT
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 7-23-97

K.C.C. OFFICE USE ONLY
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received
Distribution
 KCC SWD/Rep NSPA
 KGS Plug Other
(Specify)

Operator Name Vincent Oil Corporation

Lease Name Unruh

Well # 1

Sec. 22 Twp. 29 Rge. 18

East
 West

County Kiowa County, Kansas

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 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 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	12 1/4"	8 5/8"	24 #	515'	60/40 Poz	400	2% CaCl ₂
Production	7 7/8"	5 1/2"	18 #	4950'	Class "H"	250	

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	LKC	4261-4266'	500 gallons	
	CIBP set at 4700'				

TUBING RECORD Size 2 3/8 Set At 4250 Packer At _____ Liner Run Yes No

Date of First Resumed Production, SWD or Inj. 8-3-94 Producing Method Flowing Pumping Gas Lift Other (Explain)

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
	0	114	1		

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 4261-4266'