

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

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

Operator: License # 6412

Name: SID TOMLINSON

Address 1802 Wildwood Drive

City/State/Zip Stillwater, OK 74075

Purchaser: _____

Operator Contact Person: Sid Tomlinson

Phone (405) 372-2833

Contractor: Name: L. D. Drilling, Inc.

License: 6039

Wellsite Geologist: Dave Callewaert

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: _____

Well Name: _____

Comp. Date _____ Old Total Depth _____

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

9-27-93 10-07-93 10-07-93
 Spud Date Date Reached TD Completion Date

API NO. 15- 057-20520-0000

County FORD

APP. NE. SW. NE Sec. 5 Twp. 26S Rge. 21 XX ^E

OK 1500 Feet from SW (circle one) Line of Section

OK 1430 Feet from EW (circle one) Line of Section

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

Lease Name KLENKE Well # 1

Field Name Wildcat

Producing Formation _____

Elevation: Ground 2320' KS 2325'

Total Depth 4890' PSTD _____

Amount of Surface Pipe Set and Cemented at 415 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 D&A att II
(Data must be collected from the Reserve Pit) S-27-94

Chloride content 42,000 ppm Fluid volume 1,000 bbls

Dewatering STATE RECEIVED Evaporation

Location of fluid disposal COMMISSION offsite:

Operator Name 2/4/94 1994

Lease Name Wichita, Kansas 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 1-15-94

Subscribed and sworn to before me this 2 day of Feb 19 94.

Notary Public Helen A Cole

Date Commission Expires 5-24-96

K.C.C. OFFICE USE ONLY		
F	<input checked="" 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"/> NEPA
<input type="checkbox"/>		<input type="checkbox"/> Other
(Specify)		

SIDE TWO

Operator Name SID TOMLINSON Lease Name KLENKE Well # 1
 Sec. 5 Twp. 26S Rgs. 21 East West
 County FORD

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:

Halliburton ran Dual Induction and Compensated Density/Neutron logs.

SEE ATTACHED DRILLING REPORT FOR DSTS.

Name	Top	Datum	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Details	<input type="checkbox"/> Sample
Anhydrite	1369	+ 956			
Heebner	4034	-1709			
Lansing	4154	-1829			
Cherokee Sh	4728	-2403			
Mississippian	4798	-2473			
TD	4892				

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"	28#	415'	60/40 Poz	250	2% Gel, 3% cc

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth		Type of Cement	#Sacks Used	Type and Percent Additives
	Top	Bottom			
<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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

TUBING RECORD	Size	Set At	Packer At	Liner Run
				<input type="checkbox"/> Yes <input type="checkbox"/> No

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)

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

Disposition of Gas: Vented Sold Used on Loc. (If vented, submit ACO-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled

Production Interval: _____

Phone 913-483-2627, Russell, Kansas
 Phone 316-793-5861, Great Bend, Kansas

ORIGINAL

Phone Plainville 913-434-2812
 Phone Ness City 913-798-3843

ALLIED CEMENTING CO., INC.

4864

Home Office P. O. Box 31

Russell, Kansas 67665

New

Date	Sec	Twp.	Range	Called Out	On Location	Job Start	Finish
9/27/93	5	26S	21W	8:30 PM	10:30	01:30	02:00
Lease	Well No.	Location		County	State		
	1	Bellfont 1/2 E 3 1/2 SE 1/2 SW 1/4		Ford	K		

Contractor L.D. Drilling	
Hole Size 12 1/4"	T.D. 415'
Csg. 8 5/8" 2.8"	Depth 415'
Tbg. Size	Depth
Drill Pipe	Depth
Tool	Depth
Cement Left in Csg. 15'	Shoe Joint
Press Max.	Minimum
Meas Line	Displace 24.96 bbl
Perf.	

Owner Same
To Allied Cementing Co., Inc. You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed.
Charge To Sid Tomlinson
Street
City State
The above was done to satisfaction and supervision of owner agent or contractor.
Purchase Order No.
<input checked="" type="checkbox"/> Dusty Clark
CEMENT
Amount Ordered 250 60% 2% Gel 3% CC
Consisting of
Common
Poz. Mix
Gel.
Chloride
Quickset
Sales Tax
Handling
Mileage

EQUIPMENT

No.	Cementer	Gacy
Pumptrk 120	Helper	
No.	Cementer	Mike
Pumptrk	Helper	
	Driver	Bill
Bulktrk 116	Driver	

DEPTH of Job

Reference:	Pump Truck	
	Mileage	
	8 5/8" TWP	
	Sub Total	
	Tax	
	Total	

Remarks: **Cement circulated**

Thank you & Stan L. Heron

Sub Total	
Total	
Floating Equipment	
RECEIVED STATE CORPORATION COMMISSION FEB 4 1994 CONSERVATION DIVISION Wichita, Kansas	