

FORM MUST BE TYPED

SIDE ONE

ORIGINAL

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

Operator: License # 4997

Name: Ross Hoener

Address 70424 NE 10th Ave.

City/State/Zip Iuka, Kans. 67066

Purchaser: \_\_\_\_\_

Operator Contact Person: Ross Hoener

Phone (316) 546-2596

Contractor: Name: Pratt-Well-Service

License: 5893

Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion

New Well  Re-Entry  Workover

Oil  SMD  SLOW  Temp. Abd.  
 Gas  ENHR  SIGW  
 Dry  Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: Pratt Well Service

Well Name: Hoener B-2

Comp. Date 4-8-54 Old Total Depth 4400

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

8-23-94 8-29-94  
Spud Date Date Reached TD Completion Date

API NO. 15- NA (PRE-1967)

County Pratt

SW-NW NW - 35 Sec. 26 Twp. 13 Rge. W

990 Feet from S (circle one) Line of Section

3300 Feet from E (circle one) Line of Section

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

Lease Name Hoener "B" Well # 2

Field Name Iuka-Carmi

Producing Formation Viola

Elevation: Ground 1949 KB 1954

Total Depth 4400 PBTD 4362

Amount of Surface Pipe Set and Cemented at 1201 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 8/5-4-95  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Disposal method used \_\_\_\_\_

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name \_\_\_\_\_

License Name \_\_\_\_\_ License No. \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S Rng. \_\_\_\_\_ E/W \_\_\_\_\_

County \_\_\_\_\_ Docket No. \_\_\_\_\_

STATE CORPORATION COMMISSION  
RECEIVED  
NOV 02 1994  
CONSERVATION DIVISION  
WICHITA, KANSAS

11-2-94

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 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 Ross Hoener

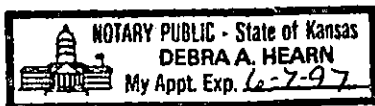
Title owner Date \_\_\_\_\_

Subscribed and sworn to before me this 15<sup>th</sup> day of November, 19 94.

Notary Public Debra A Hearn

Date Commission Expires 6-7-97

K.C.C. OFFICE USE ONLY		
F	<input type="checkbox"/> Letter of Confidentiality Attached	
C	<input type="checkbox"/> Wireline Log Received	
C	<input type="checkbox"/> Geologist Report Received	
Distribution		
<input checked="" type="checkbox"/>	KCC	<input type="checkbox"/> SWD/Rep <input type="checkbox"/> NGPA
<input type="checkbox"/>	KGS	<input type="checkbox"/> Plug <input type="checkbox"/> Other (Specify)



PI

SIDE TWO

Operator Name Ross Hoener Lease Name Hoener "B" Well # 2  
 Sec. 35 Twp. 26 Rge. 13  East  West  
 County Pratt

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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
List All E.Logs Run:				

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	# Sacks Used	Type and Percent Additives
1201		8 5/8	24#	1201	Pos.-Com.	500-200	
4393		5 1/2	14#	4393	Posmix	200	

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	3783-91	Standard	100	10% Salt
<input type="checkbox"/> Plug Back TD				
<input checked="" 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
	Recomplete in old perf		
4	4222-64	500 DSFE Acid	

<b>TUBING RECORD</b>	Size 2 3/8	Set At 4349	Packer At None	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj. 8/29/94	Producing Method <input type="checkbox"/> Flowing <input checked="" type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil Bbls. 5	Gas Mcf	Water Bbls. 20	Gas-Oil Ratio 36

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: \_\_\_\_\_