

15-151-20017-00-01

FORM MUST BE TYPED

SIDE ONE

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

CONFIDENTIAL

API NO. 15- PRE-1967 **COPY**
County Pratt
Sec. 6 Twp. 26 Rge. 11W

Operator: License # 4767
Name: Ritchie Exploration, Inc.
Address 125 N. Market, Suite 1000
City/State/Zip Wichita, KS 67202
Purchaser: Texaco
Operator Contact Person: Lisa Thimmesch
Phone (316) 267-4375

2130 Feet from SW (circle one) Line of Section
1980 Feet from SW (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SW, NW or SW (circle one)

Contractor: Name: _____
License: _____
Wellsite Geologist: _____
Designate Type of Completion
 New Well Re-Entry X Workover
X Oil SWD SLOW Temp. Abd.
 Gas EXHR SIGW
 Dry Other (Cure, VSW, Expl., Cathodic, etc)

Lease Name Deniston "P" Well # 2
Field Name _____
Producing Formation L/KC
Elevation: Ground _____ KS 1859
Total Depth 4115 PSTD 3725

If Workover/Re-Entry: old well info as follows:
Operator: Imperial Oil
Well Name: Deniston #2
Comp. Date 5/67 Old Total Depth 4116
X CEMENT SQUEEZE
 Deepening X Re-perf. _____ Conv. to Inj/SWD
X Plug Back 3725 PSTD
 Cemented _____ Docket No. _____
 Dual Completion _____ Docket No. _____
 Other (SWD or Inj) Docket No. _____
7-13-95 7-27-95
~~Start~~ Date OF START Date Reached TD Completion Date OF
OF WORKOVER OF WORKOVER

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 conc.

Drilling Fluid Management Plan REWORK 89K 2-16-96
(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 _____
Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/W
County _____ Docket No. _____

PLEASE KEEP THIS INFORMATION CONFIDENTIAL

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 [Signature]
Title President Date 10/19/95
Subscribed and sworn to before me this 19 day of Oct
19 95
Notary Public [Signature]
Date Commission Expires _____

LISA THIMMESCH
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 3-20-99

STATE CORPORATION COMMISSION RECEIVED
K.C.C. OFFICE USE
F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Reports Received
10-20-95
CONSERVATION DIVISION
KANSAS
XCC _____
XGS _____ Plug _____ other _____
(Specify)