

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

COPY

APT NO. 15- NA 15-155-20, 187 0001

Operator: License # 5235
Name: Producers Oil Company
Address 427 S. Boston, Ste 711
Tulsa, OK 74103
City/State/Zip _____
Purchaser: None as yet ^{KCC JH}
Operator Contact Person: R.N. Knoblock
Phone (918) 582-1188
Contractor: Name: Gressel
License: 3004
Wellsite Geologist: None
Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOV Temp. Abd.
 Gas EXHR SIGW
 Dry Other (Core, WSV, Expl., Cathodic, etc)

County Reno
W/2-W/2-NW Sec. 23 Twp. 23 Rge. 4 E
1320 Feet from S (circle one) Line of Section
330 Feet from E (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, SE, NW or SW (circle one)
Lease Name VanSickle Well # 6
Field Name Burrton
Producing Formation Mississippi
Elevation: Ground 1470 CA 1475
Total Depth 3615 PBTD 3310
Amount of Surface Pipe Set and Cemented at 241 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/ _____ sz cat.

If Workover/Re-Entry: old well info as follows:
Operator: Producers Oil Company
Well Name: VanSickle #6
Comp. Date 1-5-72 Old Total Depth 3615
 Deepening Re-perf. _____ Conv. to Inj/SWD
 Plug Back 3310 PBTD
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
3-21-94 3-23-94 3-23-94
Date OF START OF WORKOVER Date Reached TD Completion Date OF WORKOVER

Drilling Fluid Management Plan REWORK JH 7-26-94
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume _____ bbls
Dewatering method used _____
Location of fluid d ^{KCC DISTRICT #2} _____
Operator Name NOV 8 1994
Lease Name _____ License No. _____
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 R.N. Knoblock
Title Vice-President Date 4-6-94
Subscribed and sworn to before me this 7TH day of April 19 94.
Notary Public: [Signature]
Date Commission Expires _____ MY COMMISSION EXPIRES 8-7-96

K.C.C. OFFICE USE ONLY		
F	<input checked="" type="checkbox"/>	Letter of Confidentiality Attached
G	<input checked="" 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"/>	EGS	<input type="checkbox"/> Plug
		<input checked="" type="checkbox"/> KCPA
		<input type="checkbox"/> Other
		(Specify)

Operator Name Producers Oil Company Lease Name VanSickle Well # 6

Sec. 23 Twp. 23S Rge. 4 East West
 County Reno

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

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	15 1/2	10 3/4	40	241	Reg	260	
Production	7 7/8	5 1/2	14	3,610	60/40 Poz	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				
<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	CIBP @ 3310 Ft 3284-3290 Ft	Acidized w/ 750 Gal. 15%	3284

TUBING RECORD	Size 2 7/8 EUE	Set At 3242	Packer At 3242	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.	Producing Method <input checked="" type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
3-23-94 Gas TSTM				
Estimated Production Per 24 Hours	Oil 0	Acls.	Gas TSTM	Water 0
			Gas-Oil Ratio 0	Gravity NA

Disposition of Gas: Vented Sold Used on Lease Open Hole Perf. Dually Comp. Commingled

Production Interval 3284-3290