

ORIGINAL SIDE ONE

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

Operators License # 6006Name: MOLZ OIL COMPANYAddress RR 2, Box 54Kiowa, KS 67070

City/State/Zip _____

Purchaser: N/AOperator Contact Person: Jim MolzPhone (316) 296-4558Contractor: Name: ALLEN DRILLING COMPANYLicense: 5418

Wellsite Geologist: _____

Designate Type of Completion

 New Well Re-Entry X Workover Oil SWD Temp. Abd. Gas Inj Delayed Comp.X Dry Other (Core, Water Supply, etc.)

If OWO: old well info as follows:

Operator: Thornton E. AndersonWell Name: Lechner #2Comp. Date 2-21-72 Old Total Depth 4692

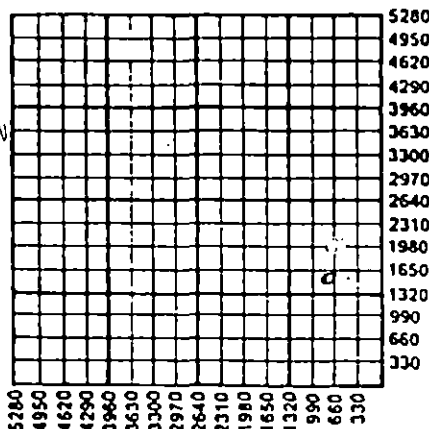
Drilling Method:

X Mud Rotary Air Rotary Cable5/17/91 5/17/91 5/17/91

Spud Date Date Reached TD Completion Date

API NO. 15- 095-20,269-4-0001County KingmanC NE SE Sec. 25 Twp. 30 Rge. 7 X East West1540 Ft. North from Southeast Corner of Section770 Ft. West from Southeast Corner of Section

(NOTE: Locate well in section plat below.)

Lease Name LECHNER Well # 2 OWWOField Name Maple GroveProducing Formation P & AElevation: Ground 1560 KB 1565Total Depth 655 PBD _____

5280
4950
4620
4290
3960
3630
3300
2970
2640
2310
1980
1650
1320
990
660
330

A-152 DPA

Amount of Surface Pipe Set and Cemented at 240' / old hole feetMultiple Stage Cementing Collar Used? Yes NoIf yes, show depth set FeetIf Alternate II completion, cement circulated from feet depth to w/ SX cmt.

INSTRUCTIONS: This form shall be completed in triplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 120 days of the spud date of any well. Rule 82-3-130, 82-3-107 and 82-3-106 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 drillers time log 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. Any recompletion, workover or conversion of a well requires filing of ACO-2 within 120 days from commencement date of such work.

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 _____

Title President Date 6-7-91Subscribed and sworn to before me this 7th day of June, 19 91.Notary Public B. Ann LeaderDate Commission Expires 4-12-93

NOTARY PUBLIC

STATE OF KANSAS

My Appt. Exp. 4-12-93

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Drillers Timelog Received

Distribution

✓ KCC SWD/Rep NGPA
 KGS Plug Other
(Specify)

SIDE TWO

Operator Name MOLZ OIL CO. Lease Name LECHNER Well # 2 OWWO
 Sec. 25 Twp. 30 Rge. 7 ☐ East ☒ West
 County Kingman

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.)

☐ Yes ☒ No

Samples Sent to Geological Survey

☐ Yes ☒ No *NE*

Cores Taken

☐ Yes ☒ No

Electric Log Run
(Submit Copy.)

☐ Yes ☒ No

Formation Description

☐ Log ☐ Sample

Name

Top

Bottom

Attempt to wash-down old well. Unable to get through old cement plug at 336', drilled out of old hole to 655'. Decision was made to abandon attempt, and to re-plug.

No new samples, or Geologic reports.

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
old hole		8-5/8		240'			

PERFORATION RECORD

Shots Per Foot

Specify Footage of Each Interval Perforated

Acid, Fracture, Shot, Cement Squeeze Record
(Amount and Kind of Material Used)

Depth

TUBING RECORD

Size

Set At

Packer At

Liner Run

☐ Yes ☐ No

Date of First Production

Producing Method

☐ Flowing ☐ Pumping ☐ Gas Lift ☐ Other (Explain)

Estimated Production
Per 24 Hours

Oil

Bbls.

Gas

Mcf

Water

Bbls.

Gas-Oil Ratio

Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☐ Sold ☐ Used on Lease
(If vented, submit ACO-18.)

☐ Open Hole ☐ Perforation ☐ Dually Completed ☐ Commingled

☐ Other (Specify) _____



P.O. Box 4442
Houston, Texas 77210

ORIGINAL CEMENTING LOG

STAGE NO.

Date 5-17-91 District WED. COOE Ticket No. 648-586
Company Moltz Oil Co. Rig ALLEN 42
Lease CECLINE # Well No. 2
County KINGMAN State KANSAS
Location 25-30S-7W Field
DUQUOIN, 2 1/2 E, 1 1/2 N, 4 1/5
CASING DATA PTA ☒ Squeeze ☐
Surface ☐ Intermediate ☐ Production ☐ Liner ☐
Size 3 3/8" Type _____ Weight _____ Collar _____

Casing Depths Top BL Bottom _____

Drill Pipe: Size 4 1/2" Weight 16.6# Collars XH
Open Hole: Size 7 7/8" T D 655 ft. P B to _____ ft.

CAPACITY FACTORS

Casing: Bbls/Lin ft. 0.637 Lin ft./Bbl. 15.7
Open Holes: Bbls/Lin ft. _____ Lin ft./Bbl. _____
Drill Pipe: Bbls/Lin ft. 0.1422 Lin ft./Bbl. 70.3
Annulus: Bbls/Lin ft. 0.406 Lin ft./Bbl. 24.64
Bbls/Lin ft. _____ Lin ft./Bbl. _____
Perforations: From _____ ft. to _____ ft. Amt. _____

COMPANY REPRESENTATIVE MARK KERN

CEMENT DATA:

Spacer Type: FRESH H₂O
Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG
LEAD Pump Time _____ hrs. Type _____
Excess _____
Amt. _____ Sks Yield _____ ft³/sk Density _____ PPG
TAIL Pump Time _____ hrs. Type 40:60:4
Excess _____
Amt. 150 Sks Yield 1.40 ft³/sk Density 13.9 PPG
WATER Lead _____ gals/sk Tail 6.7 gals/sk Total 20.9 Bbls
Pump Trucks Used 2902-6431 Max Eick
Bulk Equip 2903-6433 JUSTIN HOKI

Float Equip Manufacturer _____
Shoe Type _____ Depth _____
Float Type _____ Depth _____
Centralizers: Quantity _____ Plugs Top _____ Btm. _____
Stage Collars _____
Special Equip _____
Disp. Fluid Type FRESH H₂O Amt. _____ Bbls. Weight 3.34 PPG
Mud Type _____ Weight _____ PPG

TIME	PRESSURES PSI		FLUID PUMPED DATA			REMARKS
AM/PM	DRILL PIPE CASING	ANNULUS	TOTAL FLUID	Pumped Per Time Period	RATE Bbls Min	
7:00						ON LOCATION, RIG UP
						JOB + SAFETY MEET
						350' 650'
			20	20	3	START FRESH H ₂ O VIA DUTCH
			23 3/4	3 3/4	6	FRESH H ₂ O IN - START 40:60:4
9:30			23	6 1/4	6	40:60:4 IN - START FRESH H ₂ O
					5	FRESH H ₂ O IN - STOP PUMPS
						PERCULATE TO SURFACE FROM 300'
						WITH 180' 40:60:4
11:00						RECEIVED
						STATE COMPT. <u>CEMENTATION</u>
						<u>ADDITIONAL 155X</u>
						JUN 12 1991
						CONSERVATION DIVISION
						Wichita, Kansas

FINAL DISP. PRESS. _____ PSI BUMP PLUG TO _____ PSI BLEEDBACK _____ BBLs

Form No. SR 0502 (Rev. 3/90)
Note: Must accompany job ticket.

THANK YOU

P.O. Box 4442
Houston, Tx. 77210

REMIT TO: P.O. Box 100806, Houston, Tx: 77212

SERVICE OPERATIONS CONTRACT

TERMS NET 30 DAYS FROM DATE OF CONTRACT

DATE 5-17-91

SERVICE CONTRACT NO. 648586

CUSTOMER ACCOUNT NO.		DIST. NAME MED. LODGE		NEW WELL <input type="checkbox"/> OLD WELL <input checked="" type="checkbox"/>		WELL TYPE O		JOB NO.			
CUSTOMER MOORE OIL CO		DIST. NUMBER 534		WELL NO. 2		LEASE NAME & FEDERAL OFFSHORE LEASE NO. LECKNER					
ADDRESS R.R. 2, BOX 54				COUNTY/ PARISH KINGMAN		CODE		STATE KS		CODE 13	
CITY KIOWA		STATE KANSAS		ZIP 67070		FIELD NAME				CITY CODE	
AUTHORIZED BY: (Please Print) MIKE KERN				ORDER NO.		WELL OWNER MOORE OIL CO				MTA CODE	
STAGE NO.		JOB CODE OILS - CEMENT		WORKING DEPTH 600		PUMPING EQUIPMENT		TIME (A OR P)		DATE	
		1 SURFACE <input type="checkbox"/> 2 INTERMEDIATE <input type="checkbox"/> 3 PRODUCTION <input type="checkbox"/> 4 REMEDIAL <input checked="" type="checkbox"/>				TRUCK CALLED		S. 30 P		MM DD YY 05 17 91	
TOTAL PREV. GALS.		SIZE HOLE 7 7/8"		DEPTH 655		ARRIVED AT JOB		7:00 P		05 17 91	
		SIZE & WT. CASING 8 7/8"		DEPTH		START OPERATION		8:15 P		05 17 91	
TOTAL MEAS. DEPTH		SIZE & WT. DRILL PIPE OR TUBING 4 1/2", 16.6#		DEPTH 600		FINISH OPERATION		1:00 P		05 17 91	
FT.		PACKER DEPTH		FLUID PUMPED 40:60:4		TIME RELEASED				05 17 91	
PRESSURE AVG. PSI. MAX. PSI.						MILES FROM STATION TO WELL 40		SALESMAN NUMBER			
CUSTOMER INSTRUCTIONS FOR DISPOSAL OF RETURNED CEMENT											
MAX. BPM 6											
S/S EMPLOYEE NUMBER 666454											

RECEIVED
STATE CORPORATION COMMISSION

JUN 12 1991

CONSERVATION DIVISION
Wichita, Kansas

CONTRACT CONDITIONS: (This contract must be signed before the job is commenced or merchandise is delivered)

The undersigned is authorized to execute this contract as an agent of the customer. As such, the undersigned agrees and acknowledges that this contract for services, materials, products, and/or supplies includes all of and only those terms and conditions appearing on the front and back of this document. No additional or substitute terms and/or conditions shall become a part of this contract without the written consent of an officer of BJ SERVICES.

PRICE BOOK	01
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SIGNED: [Signature]
(WELL OWNER, OPERATOR, CONTRACT OR AGENT)

	PRICE BOOK REF. NO.	QUANTITY	DESCRIPTION	UNIT PRICE	U/M	PRICE EXTENSION
1	10102106	1	SOI' - 1,000' PUMP (HANCE	640.00	F	640 00
2	10109005	40	MILEAGE*, ONE WAY	2.35	F	94 00
3	10410504	73	CLASS A	5.50	Q	429 00
4	10415013	52	FLYASH	2.91	Q	151 32
5	10420145	447	P.T. GFL	.14	L	62 53
6	10330001	137	MIXING SERVICE	1.10	Q	150 70
7	10940101	232	DRAVAGE S.B X 40	.75	F	174 00
8						
9						
10						

SERVICE REPRESENTATIVE KEVIN BRINGSADT

THE ABOVE MATERIAL AND SERVICE
ORDERED BY CUSTOMER AND RECEIVED BY: *X Mich. Hsu*

☐ CHECK IF CONTINUATION IS USED

(WELL OWNER, OPERATOR, CONTRACTOR OR AGENT)

CUSTOMER: This is not an invoice - This Service Operations Contract is subject to review and correction by our Accounting Department.



LOAD SHEET

JOB NUMBER		CONTRACT NUMBER 643-586 ORIGINAL		DATE		DISTRICT NAME Med. Lodge, Ky	
CUSTOMER NAME AND ADDRESS Moez Orla RR #2, Box 54 Houns, Ky 67070				DIRECT SHIPMENT FROM VENDOR NAME			
Item No.	Part Number	Description	UNIT OF MEASURE	AMOUNT LOADED	DIRECT SHIPPED	AMOUNT RETURNED	
1	410504	Class A	Q	78		0	
2	415018	Fly Ash	Q	52		0	
3	420145	D-I Fuel	L	447		0	
4							
5							
6							
7							
8							
9							
10							
11		35 SY. Ream					
12		35					
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							
24							
25							
26							
27							

COPY 1 — DISTRICT COPY

COPY 2 — CUSTOMER COPY

COPY 3 — HOUSTON

LOADED BY: J. Kealey
PRINTED
KEOZN BRUNO
SIGNATURE
CUSTOMER: Rick Kern
SIGNATURE
DATE: 5/17/91

RECEIVED
STATE CORPORATION COMMISSION
JUN 12 1991
CONSERVATION DIVISION
Wichita, Kansas