

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

ORIGINAL

Operator: License # 31653Name: Buffalo Operating LLCAddress 1888 Sherman St
Suite 760City/State/Zip Denver, CO 80203-1160Purchaser: Western Resources IncOperator Contact Person: Randall K. ArnoldPhone (303) 813-1568

Contractor: Name: _____

License: _____

Wellsite Geologist: NONEDesignate Type of Completion
_____ New Well _____ Re-Entry XX Workover

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

If Workover: SUN OIL CORPORATION

Operator: _____

Well Name: Duckworth #2Comp. Date 8/24/58 Old Total Depth 4560'

_____ Deepening XX Re-perf. _____ Conv. to Inj/SWD
XXX Plug Back 4395' PBTD
_____ Commingled _____ Docket No. _____
_____ Dual Completion _____ Docket No. _____
_____ Other (SWD or Inj?) Docket No. _____

12-10-97 12-13-97
SPUD Date of START Date Reached TD Completion Date of
OF WORKOVER WORKOVER

API NO. 15- Drilled 1958 15-095-01197-0001County Kingman_____ - SE - SE Sec. 32 Twp. 30 Rge. 8 XX W663 Feet from SN (circle one) Line of Section718 Feet from SW (circle one) Line of SectionFootages Calculated from Nearest Outside Section Corner:
NE, SP, NW or SW (circle one)Lease Name Duckworth Well # 2Field Name SpiveyProducing Formation MississippiElevation: Ground 1671' KB 1678'Total Depth 4560' PBTD 4395'Amount of Surface Pipe Set and Cemented at 270 FeetMultiple Stage Cementing Collar Used? _____ Yes _____ NoIf yes, show depth set _____ FeetIf Alternate II completion, cement circulated from _____feet depth to _____ w/ _____ sx cmt.Drilling Fluid Management Plan REWORK 075-5-98
(Data must be collected from the Reserve Pft)Chloride content _____ ppm Fluid volume _____ bblsDewatering method used _____Location of fluid disposal if hauled offsite: _____Operator Name _____Lease Name _____ License No. __________ Quarter _____ Sec. _____ Twp. _____ S Rng. _____ E/WCounty _____ Docket No. _____

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 Randall K. ArnoldTitle Randall K. Arnold/Manager Date 1/13/98Subscribed and sworn to before me this 13 day of January, 19 98.Notary Public Debby J. BlackDate Commission Expires 7/30/01

K.C.C. OFFICE USE ONLY
F _____ Letter of Confidentiality Attached
C _____ Wireline Log Received
C _____ Geologist Report Received

Distribution
KCC ✓ STATE _____ SWD/Rep _____ NGPA _____
KGS _____ Plug 7 Other _____
FEB 27 1998 (Specify)

SIDE TWO

Operator Name Buffalo Operating LLCLease Name DuckworthWell # 2Sec. 32 Twp. 30 Rge. 8
☐ East
☒ WestCounty 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☐ Log Formation (Top), Depth and Datums ☐ Sample

Samples Sent to Geological Survey

☐ Yes ☒ No

Name

Top

Datum

Cores Taken

☐ Yes ☒ No

Electric Log Run

☐ Yes ☒ No

(Submit Copy.)

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

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	4395'-4431'	Class "A"	125	NONE
<input checked="" 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
	Cement Retainer	125 SX of Neat Cement	4395
2	4360'-4380'	500 gals of 10% MCA, 19000 gals of 40# gel, 11000# 20/40, 19000# of 12/20 sand	

TUBING RECORD	Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	2 7/8	4323			
Date of First Resumed Production, SWD or Inj.	12/13/97	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. 0	Gas Mcf 29	Water Bbls. 35	Gas-Oil Ratio	Gravity

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease
(If vented, submit ACO-18.)☐ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
☐ Other (Specify) _____4360'-4380'

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

ORIGINAL

Operator: License # 31653

Name: Buffalo-Operating LLC

Address 1888 Sherman St

Suite 760

City/State/Zip Denver, CO 80203-1160

Purchaser: Western Resources Inc

Operator Contact Person: Randall K. Arnold

Phone (303) 813-1568

Contractor: Name:

License:

Wellsite Geologist: NONE

Designate Type of Completion

New Well Re-Entry XX Workover

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

If Workover:

SUN OIL CORPORATION

Operator:

Well Name: Duckworth #2

Comp. Date 8/24/98 Old Total Depth 4560'

Deepening XX Re-perf. Conv. to Inj/SWD
XXX Plug Back 4395' PBD
Commingled Docket No.
Dual Completion Docket No.
Other (SWD or Inj?) Docket No.
12-10-97 12-13-97

Date of START Date Reached TD Completion Date of
OF WORKOVER WORKOVER

API NO. 15- Drilled 1958 15-095011970001

County Kingman

SE - SE Sec. 32 Twp. 30 Rge. 8 XX W

663 Feet from SW (circle one) Line of Section

718 Feet from NW (circle one) Line of Section

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

Lease Name Duckworth Well # 2

Field Name Spivey

Producing Formation Mississippi

Elevation: Ground 1671' KB 1678'

Total Depth 4560' VPBD 4395'

Amount of Surface Pipe Set and Cemented at 270 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 JH 5-5-98
(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 License No.

Quarter Sec. Twp. S Rng. E/W

County Docket No.

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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 Randall K. Arnold/Manager

Date 1/13/98

Subscribed and sworn to before me this 13 day of January 19 98.

Notary Public Debby J. Black

Date Commission Expires 7/30/06

K.C.C. OFFICE USE ONLY

F Letter of Confidentiality Attached
C Wireline Log Received
C Geologist Report Received

Distribution

KCC SWS/Rep NGPA
KGS Plug Other
FEB 27 1998 (Specify)

Operator Name Buffalo Operating LLCLease Name DuckworthWell # 2Sec. 32 Twp. 30 Rge. 8
☐ East
☒ WestCounty 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☐ Log

Formation (Top), Depth and Datums

☐ Sample

Samples Sent to Geological Survey

☐ Yes ☒ No

Name

Top

Datum

Cores Taken

☐ Yes ☒ No

None

Electric Log Run
(Submit Copy.)☐ Yes ☒ 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

ADDITIONAL CEMENTING/SQUEEZE RECORD

Purpose:	Depth Top-Bottom	Type of Cement	#Sacks Used	Type and Percent Additives
<input type="checkbox"/> Perforate	<u>4395'-4431'</u>	<u>Class "A"</u>	<u>125</u>	<u>NONE</u>
<input type="checkbox"/> Protect Casing				
<input checked="" 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
	<u>Cement Retainer</u>	<u>125 SX of Neat Cement</u>	<u>4395</u>
<u>2</u>	<u>4360-4380'</u>	<u>500 gals of 10% MCA, 19000 gals</u>	
		<u>of 40# gel, 11000# 20/40, 19000#</u>	
		<u>of 12/20 sand</u>	
TUBING RECORD	Size	Set At	Packer At
	<u>2 7/8</u>	<u>4323</u>	
Date of First, Resumed Production, S/W or Inj.	Producing Method	Liner Run <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<u>12/13/97</u>	<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.	Gas Mcf	Water Bbls.
	<u>0</u>	<u>29</u>	<u>35</u>
Gas-Oil Ratio		Gravity	

Disposition of Gas:

METHOD OF COMPLETION

Production Interval

☐ Vented ☒ Sold ☐ Used on Lease
(If vented, submit ACO-185)

☒ Open Hole ☒ Perf. ☐ Dually Comp. ☐ Commingled
Other (Specify)
4360'-4380'