

ORIGINAL

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

API NO. 15- 185-02070-0001

County Stafford

SW - SW - NW - Sec. 29 Twp. 22N Rge. 11 W

2970 Feet from S/W (circle one) Line of Section

330 Feet from E/W (circle one) Line of Section

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

Lease Name W Spangenberg Well # 2

Field Name Richardson

Producing Formation Arbuckle

Elevation: Ground 1826 KB 1831

Total Depth 3584 PBDT

Amount of Surface Pipe Set and Cemented at 236 Feet

Multiple Stage Cementing Collar Used? Yes X No

If yes, show depth set Feet

If Alternate II completion, cement circulated from

feet depth to w/ sx cmt.

Drilling Fluid Management Plan DFA, 3-30-99 U.C.
(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.

Operator: License # 31995

Name: Charles Griffin

Address Rt 3 Box 56

Stafford KS 67578

City/State/Zip

Purchaser: Koch

Operator Contact Person: Bennie Griffin

Phone (316) 234-6189

Contractor: Name:

License:

Wellsite Geologist: 3-23-98

Designate Type of Completion
 New Well X Re-Entry Workover

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

If Workover:

Operator: Hallwood Pet Inc.

Well Name: WM Spangenberg #2

Comp. Date 7/37 'Old Total Depth 3584

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

start Date Date Reached TD 11/29/98 Completion Date

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 Benn C. Griffin

Title CONTACT PERSON Date 3-16-99

Subscribed and sworn to before me this 16th day of March, 19 99.

Notary Public Annette McNickle

Date Commission Expires 7-18-2002

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

 ANNETTE MCNICKLE
NOTARY PUBLIC
STATE OF KANSAS
My Appt. Exp. 7-18-2002

Operator Name Charles Griffin Lease Name WM Spangenberg Well # 2

Sec. ___ Twp. ___ Rge. ___ East West
 County Stafford

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 N/A	<input type="checkbox"/> Log	Formation (Top), Depth and Datum	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A	KC Lans 'E'	3292	1461
Electric Log Run (Submit Copy.)	<input type="checkbox"/> Yes <input type="checkbox"/> No N/A	KC Lans 'F'	3329	1489
List All E.Logs Run:		KC Lans 'G'	3342	1511
		KC Lans 'H'	3383	1552
		KC Lans 'J'	3415	1584
		Arbuckle	3556	1725

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
Surface	16"	13"	40	236			
Production	9"	6"	20	3560			
Liner	"	5"	3553-	3593			

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/S/P/F	2758 To 2763 Severly Sand	5" Run From 3553 To 3593
NO GAS SHOW	PUT BACK ON PUMP	

TUBING RECORD		Size	Set At	Packer At	Liner Run
		2 1/8	3452		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SMD or Inj.		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.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity

Disposition of Gas: Vented Sold Used on Lease (if vented, submit ACD-18.)

METHOD OF COMPLETION: Open Hole Perf. Dually Comp. Commingled Other (Specify) _____

Production Interval: _____

