

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

Operator: License # 6170
Name: Globe Operating, Inc.
Address Box 12
Great Bend, KS 67530
City/State/Zip _____
Purchaser: N/A
Operator Contact Person: Ralph Stalcup
Phone (316) 792 7607
Contractor: Name: Sterling Drilling Company
License: 5142
Wellsite Geologist: Randall Kilian

Designate Type of Completion
 New Well Re-Entry Workover
 Oil SWD SIOW Temp. Abd.
 Gas ENHR SIGW
 Dry Other (Core, WSW, Expl., Cathodic, etc)

If Workover:

Operator: _____
Well Name: _____
Comp. Date _____ Old Total Depth _____
 Deepening Re-perf. Conv. to Inj/SWD
 Plug Back PBTB
 Commingled Docket No. _____
 Dual Completion Docket No. _____
 Other (SWD or Inj?) Docket No. _____
11/10/94 12/16/94
Spud Date Date Reached TD Completion Date

API NO. 15- 185-22979.0000 ORIGINAL
County Stafford
 NW NW SE Sec. 16 Twp. 21S Rge. 12 X W
2310 Feet from (S)/N (circle one) Line of Section
2310 Feet from (E)/W (circle one) Line of Section
Footages Calculated from Nearest Outside Section Corner:
NE, (S), NW or SW (circle one)
Lease Name Rose Well # 1
Field Name Wildcat
Producing Formation None
Elevation: Ground 1842 KB 1851
Total Depth 3676' PBTB _____
Amount of Surface Pipe Set and Cemented at 296 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 D&A 291 11-4-95
(Data must be collected from the Reserve Pit)
Chloride content _____ ppm Fluid volume 490 bbls
Dewatering method used _____
Location of fluid disposal if hauled offsite: _____
Operator Name Ellinwood Tank Service, Inc.
Lease Name Siefkes SW License No. 4270
 Quarter Sec. 13 Twp. 22 S Rng. 12 E/W
County Stafford Docket No. 78 345

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 Ralph Stalcup
Title President Date 12/12/94
Subscribed and sworn to before me this 12 day of December 1994.
Notary Public Stacy L. Arnold
Date Commission Expires _____



RECEIVED
STATE CORPORATION COMMISSION
K.C.C. OFFICE USE ONLY
Letter of Confidentiality Attached
Wireline Log Received
Geologist Report Received
DISTRIBUTION
KCC _____ SWD/Rep _____ NGPA _____
KGS _____ Plug _____ Other _____
(Specify)

12-15-94

SIDE TWO

Operator Name Globe Operating, Inc. Lease Name Rose Well # 1
 Sec. 16 Twp. 21 Rge. 12 East County Stafford County
 West

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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Log	Formation (Top), Depth and Datums	<input type="checkbox"/> Sample
Samples Sent to Geological Survey	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Name	Top	Datum
Cores Taken	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Anhydrite	642	+1209
Electric Log Run (Submit Copy.)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Base	664	+1187
List All E.Logs Run:	Compensated Density	Topeka	2831	-980
Neutron; Radiation Guard; Dual Induction;	Compensated Sonic M.S.G.;	Heebner Sh	3115	-1264
		Toronto	3134	-1283
		Douglas Sh	3147	-1296
		Brown Lime	3246	-1395
		Lansing	3260	-1409
		Base KC	3478	-1627
		Arbuckle	3542	-1691

CASING RECORD <input checked="" type="checkbox"/> TD <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	12 1/4"	8 5/8"	24 #	297'	60/40 Poz	200	2% gel

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		Acid, Fracture, Shot, Cement Squeeze Record	
	Specify Footage of Each Interval Perforated		(Amount and Kind of Material Used)	Depth

TUBING RECORD		Size	Set At	Packer At	Liner Run	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First, Resumed Production, SWD or Inj.			Producing Method			
D&A			<input type="checkbox"/> Flowing <input type="checkbox"/> Pumping <input type="checkbox"/> Gas Lift <input type="checkbox"/> Other (Explain)			
Estimated Production Per 24 Hours	Oil <u>N/A</u> Bbls.	Gas <u>N/A</u> Mcf	Water <u>N/A</u> Bbls.	Gas-Oil Ratio	Gravity	

Disposition of Gas: Vented Sold Used on Lease (If vented, submit ACO-1B.)

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

Production Interval: _____

ORIGINAL

API#15-185-22979-0000

DRILL STEM TESTS							
NO	INTERVAL	IFP/TIME	ISF/TIME	FFP/TIME	FSF/TIME	FP/FTP	RECOVERY
1	Arb. 3495- 3550'	126# 157# 30"	483# 30"	63# 73# 15"	189# 15"	1675# 1633#	10' mud w/ s.o.
2	Arb. 3548- 3560'	42# 42# 30"	73# 30"	42# 42# 45"	84# 60"	1675# 1654#	10' H,O,&G,C,Mud 30' O,&G,C,Mud
3	Arb. 3558- 3586'	73# 63# 30"	178# 30"	84# 73# 45"	189# 60"	1675# 1654#	5' Oil 35' O,&G,C,Mud
4	Arb. 3592- 3611'	84# 78# 30"	819# 30"	84# 94# 45"	682# 60"	1759# 1738#	150' W,Mud
5							
6							
7							
8							

RECEIVED
 STATE CORPORATION COMMISSION

DEC 15 1994

CONSERVATION DIVISION
 WICHITA, KANSAS

15.185.22979.0000

ORIGINAL

ALLIED CEMENTING CO., INC.

114b

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Great Bend

DATE <u>11-10-94</u>	SEC. <u>16</u>	TWP. <u>21S</u>	RANGE <u>12</u>	CALLED OUT <u>8:00 Am</u>	ON LOCATION <u>9:30 Am</u>	JOB START <u>10:30</u>	JOB FINISH <u>11:30</u>
LEASE <u>Rose</u>	WELL # <u>1</u>	BT+SF.CO. line LOCATION <u>35-5 3/4 E - 1/2 N - W into</u>		COUNTY <u>St. Francis</u>	STATE <u>KS</u>		

OLD OR NEW (Circle one)

CONTRACTOR <u>Sterling Dig</u>	OWNER <u>Same</u>
TYPE OF JOB <u>Surface</u>	CEMENT
HOLE SIZE <u>12 1/4</u>	T.D. <u>305</u>
CASING SIZE <u>8 7/8</u>	DEPTH <u>302.77</u>
TUBING SIZE	DEPTH
DRILL PIPE	DEPTH
TOOL	DEPTH
PRES. MAX	MINIMUM
MEAS. LINE	SHOE JOINT
CEMENT LEFT IN CSG.	
PERFS. <u>DISP 17.95</u>	

AMOUNT ORDERED	<u>200sk 40 3+2</u>
COMMON	<u>120 @ 5.75 690.00</u>
POZMIX	<u>80 @ 3.00 240.00</u>
GEL	<u>3 @ 9.00 27.00</u>
CHLORIDE	<u>6 @ 25.00 150.00</u>
	@
	@
	@
	@
	@
	@
HANDLING	<u>200 @ 1.00 200.00</u>
MILEAGE	<u>16 128.00</u>
TOTAL \$ <u>1435.00</u>	

EQUIPMENT

PUMP TRUCK	CEMENTER <u>Don H</u>
# <u>181</u>	HELPER <u>Tim D</u>
BULK TRUCK	
#	DRIVER
BULK TRUCK	
# <u>101</u>	DRIVER <u>Bob B</u>

REMARKS:

Pumped all cement Released
Plug Displaced Down
Cement Did Circulate
By Allied Cementing
Thanks Don
Ham

SERVICE

DEPTH OF JOB	<u>302'</u>
PUMP TRUCK CHARGE	<u>430.00</u>
EXTRA FOOTAGE	@
MILEAGE	<u>16 @ 2.25 36.00</u>
PLUG	<u>1 @ 42.00 42.00</u>
	@
	@

CHARGE TO: Globe Oper. Inc.
 STREET PO BOX 12
KS 67300-0012

RECEIVED
 STATE CORPORATION COMMISSION
 DEC 15 1994
 TOTAL \$ 508.00
 CONSERVATION DEPT
 WICHITA, KANSAS
 FLOATEQUIPMENT