

ORIGINAL

SIDE ONE

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

Operator: License # 04511 1977 NOV 13 A.D. 1977  
Name: William H. Davis 11-13-97  
Address 2800 Mid-Continent Tower  
  
City/State/Zip Tulsa, OK 74103  
Purchaser: N/A  
Operator Contact Person: Wayne Taylor  
Phone (918) 587-7782  
Contractor: Name: Murfin Drilling  
License: 30606  
Wellsite Geologist: None  
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/Re-Entry: old well info as follows:

Operator: \_\_\_\_\_  
Well Name: \_\_\_\_\_  
Comp. Date \_\_\_\_\_ Old Total Depth \_\_\_\_\_  
☐ Deepening ☐ Re-perf. ☐ Conv. to Inj/SWD  
☐ Plug Back ☐ PBTD  
☐ Commingled ☐ Docket No. \_\_\_\_\_  
☐ Dual Completion ☐ Docket No. \_\_\_\_\_  
☐ Other (SWD or Inj?) Docket No. \_\_\_\_\_  
10-07-97 10-09-97 10-09-97  
Spud Date Date Reached TD Completion Date

API NO. 15- 075-206600000  
County Hamilton  
C NE/4 Sec. 14 Twp. 21 Rgs. 43 X E  
1533 Feet from S (N) (circle one) Line of Section  
1346 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 Barrett Well # 1A-14  
Field Name None Designated  
Producing Formation N/A  
Elevation: Ground 3812.3 KB 3821.1  
Total Depth 1050 PBTD \_\_\_\_\_  
Amount of Surface Pipe Set and Cemented at 0 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 LOST HOLE JN 2-26-98  
(Data must be collected from the Reserve Pit)  
Chloride content 7,000 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. \_\_\_\_\_

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 [Signature]  
Title Agent for William H. Davis Date 11-12-97  
Subscribed and sworn to before me this 12th day of November, 19 97.  
Notary Public [Signature]  
Date Commission Expires \_\_\_\_\_

NOTARY PUBLIC, State of Kansas  
Seward County  
HELEN M. SMITH  
My Appl. Exp. 3-8-2001

K.C.C. OFFICE USE ONLY  
F ☐ Letter of Confidentiality Attached  
C ☐ Wireline Log Received  
C ☐ Geologist Report Received  
✓ ☒ KCC ☐ SWD/Rep ☐ NGPA  
☐ KGS ☐ Plug ☐ Other  
(Specify)

Operator Name William H. Davis Lease Name Barrett Well # 1A-14  
 Sec. 14 Twp. 21 Rge. 43 ☐ East ☒ West  
 County Hamilton

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 ☐ Yes ☒ No  
 (Attach Additional Sheets.)  
 Samples Sent to Geological Survey ☐ Yes ☒ No  
 Cores Taken ☐ Yes ☒ No  
 Electric Log Run ☐ Yes ☒ No  
 (Submit Copy.)  
 List All E.Logs Run:

☐ Log Formation (Top), Depth and Datum ☐ Sample  
 Name Top Datum  
 N/A

## 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 |
|-------------------|-------------------|---------------------------|-----------------|---------------|----------------|--------------|----------------------------|
| N/A               |                   |                           |                 |               |                |              |                            |
|                   |                   |                           |                 |               |                |              |                            |
|                   |                   |                           |                 |               |                |              |                            |

## 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 | N/A              |                |             |                            |
| <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 |
|----------------|----------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------|
|                | N/A                                                                                    |                                                                                |       |
|                |                                                                                        |                                                                                |       |
|                |                                                                                        |                                                                                |       |
|                |                                                                                        |                                                                                |       |

| TUBING RECORD                                  | Size                                                                                                                                                          | Set At  | Packer At   | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|-------------|--------------------------------------------------------------------|
| Date of First, Resumed Production, SVD or Inj. | Producing Method <input type="checkbox"/> Flowing <input 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:

METHOD OF COMPLETION

Production Interval

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

☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled  
☐ Other (Specify)

15.075.20660.0000

## TELEPHONE:

AREA CODE 913 483-2627  
AREA CODE 913 483-3887

## ALLIED CEMENTING COMPANY, INC.

P. O. BOX 31  
RUSSELL, KANSAS 67665

Federal Tax I.D.# 48-0727880

ORIGINAL

TO: William H. Davis  
% Crown Consulting, Inc.  
P. O. Box 1816

Liberal, KS 67905-1816

INVOICE NO. 76237

PURCHASE ORDER NO.

LEASE NAME Barrett 1A-14

DATE 10-15-97

## SERVICE AND MATERIALS AS FOLLOWS:

|                                     |            |            |
|-------------------------------------|------------|------------|
| Common 216 sks @\$7.55              | \$1,630.80 |            |
| Pozmix 144 sks @\$3.25              | 468.00     |            |
| Gel 19 sks @\$9.50                  | 180.50     | \$2,279.30 |
| Handling 360 sks @\$1.05            | 378.00     |            |
| Mileage (116) @\$.04¢ per sk per mi | 1,670.40   |            |
| Plug                                | 470.00     |            |
| Mi @\$2.85 pmp trk chg              | 330.60     | 2,849.00   |
| Total                               |            | \$5,128.30 |

If Account CURRENT a ...  
Discount of \$ 769.24  
will be Allowed ONLY if  
Paid Within 30 Days from  
Date of Invoice.

*Thank You!*

All Prices Are Net, Payable 30 Days Following Date of Invoice. 1½% Charged Thereafter.

NOV 13 1997

# ALLIED CEMENTING CO., INC. 8595

15.075.20660.0000

Federal Tax I.D.# 48-0727880

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

ORIGINAL

SERVICE POINT:

Oakley

|                         |                     |                                       |                 |            |                            |                  |                           |
|-------------------------|---------------------|---------------------------------------|-----------------|------------|----------------------------|------------------|---------------------------|
| DATE <u>10-9-97</u>     | SEC. <u>14</u>      | TWP. <u>21</u>                        | RANGE <u>43</u> | CALLED OUT | ON LOCATION <u>3:30 AM</u> | JOB START        | JOB FINISH <u>8:00 AM</u> |
| LEASE <u>Barrett</u>    | WELL # <u>1A-14</u> | LOCATION <u>Tribune 15W-14S-4W-4S</u> |                 |            | COUNTY <u>Hamilton</u>     | STATE <u>Kan</u> |                           |
| OLD OR NEW (Circle one) |                     |                                       |                 |            |                            |                  |                           |

|                           |                 |
|---------------------------|-----------------|
| PIPE SIZE <u>17 1/4</u>   | TD <u>1045'</u> |
| CASING SIZE <u>11 3/4</u> | DEPTH           |
| TUBING SIZE               | DEPTH           |
| DRILL PIPE                | DEPTH           |
| TOOL                      | DEPTH           |
| FRESH MAX                 | MINIMUM         |
| MIX LINE                  | SHOE JOINT      |
| CEMENT LEFT IN CSG.       |                 |
| PERF.                     |                 |
| DISPLACEMENT              |                 |

## EQUIPMENT

|              |                      |
|--------------|----------------------|
| PUMP TRUCK   | CEMENTER <u>Jeff</u> |
| # <u>121</u> | HELPER <u>Dean</u>   |
| BULK TRUCK   |                      |
| # <u>303</u> | DRIVER <u>Lennie</u> |
| BULK TRUCK   |                      |
| #            | DRIVER               |

## CEMENT

AMOUNT ORDERED 360 - sks @ 60/40 per  
6% Gel

|          |            |     |   |             |                 |
|----------|------------|-----|---|-------------|-----------------|
| COMMON   | <u>216</u> | SKS | @ | <u>7.55</u> | <u>1,630.80</u> |
| POZMIX   | <u>144</u> | SKS | @ | <u>3.25</u> | <u>468.00</u>   |
| GEL      | <u>19</u>  | SKS | @ | <u>9.50</u> | <u>180.50</u>   |
| CHLORIDE |            |     | @ |             |                 |

HANDLING 360 SKS @ 1.05 378.00  
MILEAGE 4.4 per sk/mile 1,670.00

TOTAL 4,327.30

## REMARKS:

## SERVICE

100 - SKS @ 8.00'  
225 - SKS @ 2.00' to 5.00' Face  
Mixed 20 SKS on Top  
15 SKS in Bulk  
Thick Co.

|                          |                             |
|--------------------------|-----------------------------|
| DEPTH OF JOB             |                             |
| PUMP TRUCK CHARGE        | <u>470.00</u>               |
| EXTRA FOOTAGE            | @                           |
| MILEAGE <u>116 miles</u> | @ <u>2.25</u> <u>330.00</u> |
| PLUG <u>none</u>         | @                           |

Send to Crown Consulting, Liberal  
CHARGE TO: William H. Davis  
STREET P.O. Box 816  
CITY Liberal STATE Kan ZIP 67905-1816

TOTAL 800.00

## FLOAT EQUIPMENT

|  |   |  |
|--|---|--|
|  | @ |  |
|  | @ |  |
|  | @ |  |
|  | @ |  |
|  | @ |  |

TOTAL

To Allied Cementing Co., Inc.

You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TAX \_\_\_\_\_  
TOTAL CHARGE \_\_\_\_\_  
DISCOUNT \_\_\_\_\_ IF PAID IN 30 DAYS

SIGNATURE Phillip L. Hills

Phillip L. Hills  
PRINTED NAME