

STATE CORPORATION COMMISSION OF KANSAS  
OIL & GAS CONSERVATION DIVISION

WELL COMPLETION OR RECOMPLETION FORM  
ACO-1 WELL HISTORY

DESCRIPTION OF WELL AND LEASE

Operator: License # 5008 & 4119  
Name JOHN JAY DALLAH & RICHARD VLIET  
Address 405 CENTURY PLAZA BLDG.  
City/State/Zip WICHITA, KS. 67202

Purchaser CLEAR CREEK CRUDE OIL

Operator Contact Person RICHARD VLIET  
Phone 316-683-0707

Contractor: License # 5651  
Name MALLARD DRILLING

Wellsite Geologist BILL SHEPHERD  
Phone 263-5495

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

If OWWO: old well info as follows:  
Operator .....  
Well Name .....  
Comp. Date ..... Old Total Depth.....

WELL HISTORY

Drilling Method:  
 Mud Rotary  Air Rotary  Cable  
1-21-85      1-26-85      1-27-85  
Spud Date      Date Reached TD      Completion Date  
3445      3429.5  
Total Depth      PBDT

Amount of Surface Pipe Set and Cemented at 393' feet  
Multiple Stage Cementing Collar Used?  Yes  No  
If yes, show depth set.....feet  
If alternate 2 completion, cement circulated  
from.....feet depth to.....w/.....SX cmt

API NO. 15- 009-23-85B-00-00  
County BARTON  
NE SE SE Sec 31 Twp 16 Rge 12  East  West

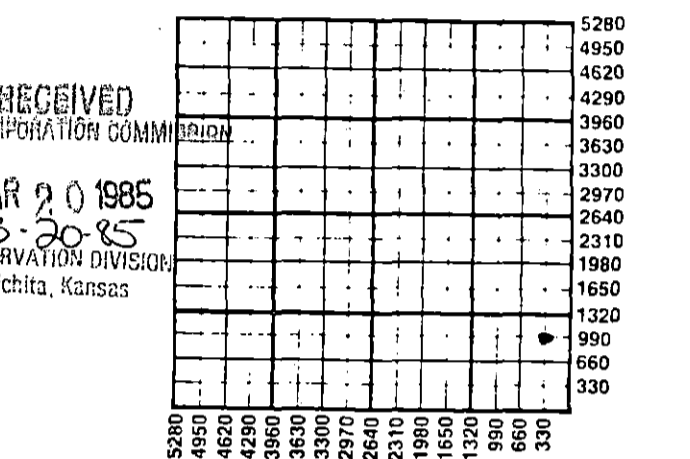
990 Ft North from Southeast Corner of Section  
330 Ft West from Southeast Corner of Section  
(Note: Locate well in section plat below)

Lease Name CHARLES Well # 1

Field Name Reif, So. (ASND) REV.

Producing Formation KC-LANSING

Elevation: Ground 1937 KB 1945  
Section Plat



WATER SUPPLY INFORMATION  
Disposition of Produced Water:  Disposal  Repressuring  
Docket # .....

Questions on this portion of the ACO-1 call:  
Water Resources Board (913) 296-3717

Source of Water:  
Division of Water Resources Permit #.....  
 Groundwater.....Ft North from Southeast Corner  
(Well) .....Ft West from Southeast Corner of  
Sec Twp Rge  East  West  
 Surface Water.....Ft North from Southeast Corner  
(Stream, pond etc).....Ft West from Southeast Corner  
Sec Twp Rge  East  West  
 Other (explain) PURCHASED FROM WERTH TANK, HAYS KANSAS  
(purchased from city, R.W.D. #)

INSTRUCTIONS: This form shall be completed in duplicate and filed with the Kansas Corporation Commission, 200 Colorado Derby Building, Wichita, Kansas 67202, within 90 days after completion or recompletion of any well. Rule 82-3-130 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 drillers time log shall be attached with this form. 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 OPERATOR Date 3/15/85

Subscribed and sworn to before me this 15th day of March 1985

Notary Public [Signature]

Date Commission Expires 10/12/85

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Drillers Time Log Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other (Specify)

DORENE K. DUNN  
NOTARY PUBLIC  
State of Kansas  
My Appt. Expires 10/12/85

Section 172

Operator Name RICHARD VLIET Lease Name CHARLES Well # 1

Sec. 31 Twp. 16S Rge. 12  East  West County BARTON

WELL LOG

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  
 Samples Sent to Geological Survey  Yes  No  
 Cores Taken  Yes  No

Formation Description  
 Log  Sample

Name	Top	Bottom
<del>ANHYDRITE</del>		
ANHYDRITE	847	(1098)
HEEBNER	3051	(-1106)
TORONTO	3068	(-1123)
BROWN LIME	3139	(-1194)
LANSING K.C.	3157	(-1212)
CONGLOMERATE	3402	(-1457)
ARBUCKLE	3428	(-1483)

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
(NEW) SURFACE CASING		5 5/8	23 lb	393 FT.	60/40 PZ	215	3% cc 2%
(USED) PRODUCTION		4 1/2	10 1/2 lb	3429.5 FT.	60/40 PZ	150	3% 2%
PERFORATION RECORD				Acid, Fracture, Shot, Cement Squeeze Record (Amount and Kind of Material Used)			
Shots Per Foot	Specify Footage of Each Interval Perforated					Depth	
1	3312 - 3315, 3327, 3332			3000 GAL. 15% MCA		500 GAL. 15%	
2	3312-16 3327-33						
2	3161-64 3188-91			3000 GAL. 15% MCA		3191	
TUBING RECORD		Size	Set At	Packer at	Liner Run	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
		2 3/8	3430				
Date of First Production		Producing Method					
2-13-85		<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	Gas	Water	Gas-Oil Ratio	Gravity	
➔		10 Bbls	MCF	16 Bbls			

METHOD OF COMPLETION

Production Interval

Disposition of gas:  Vented  Open Hole  Perforation  
 Sold  Other (Specify) .....  
 Used on Lease  Dually Completed  Conmingled

3161-64 3188-91  
 .....  
 3312-16 3327-33  
 .....

Richard Vliet

Charles #1

Operator Name ..... Lease Name..... Well #.....

Sec... 31 ... Twp... 16 ... Rge... 12W ... East West County... Barton

WELL LOG

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
Samples Sent to Geological Survey [ ] Yes [ ] No
Cores Taken [ ] Yes [ ] No

Formation Description [ ] Log [ ] Sample

Name Top Bottom

DST #1 3144-97, 30-30-10
weak blow died in 16 minutes
rec. 60' mud show of oil in tool
ISIP 460 # FP 39-39, 58-58

DST#2 3298 3340, 30-30-60-30
Fair blow thru-out recovered 120'
GIP, 90' GOCM (35% gas, 30% oil, 35% mud) 300' gassy, frothy oil, (25% gas, 60% oil, 10% mud, 5% water)
SIP 974/905 # FP 58-88, 137-156
Temperature 106 degrees

CASING RECORD [ ] New [ ] Used
Report all strings set-conductor, surface, intermediate, production, etc.
Purpose of String Size Hole Size Casing Weight Setting Type of #Sacks Type and Percent
Drilled Set (in O.D.) Lbs/Ft. Depth Cement Used Additives
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 Gas Water Gas-Oil Ratio Gravity
Bbls MCF Bbls CFPB

METHOD OF COMPLETION Production Interval

Disposition of gas: [ ] Vented [ ] Open Hole [ ] Perforation
[ ] Sold [ ] Other (Specify) .....
[ ] Used on Lease

[ ] Dually Completed RECEIVED
[ ] Commingled STATE CORPORATION COMMISSION

APR 19 1985

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ACO-1 WELL HISTORY

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Name .....  
Address .....  
City/State/Zip .....

Purchaser.....

Operator Contact Person .....  
Phone .....

Contractor: License # .....  
Name .....

Wellsite Geologist.....  
Phone.....

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API NO. 15-.....  
County.....  
..... Sec..... Twp..... Rge.....  East  West

..... Ft North from Southeast Corner of Section  
..... Ft West from Southeast Corner of Section  
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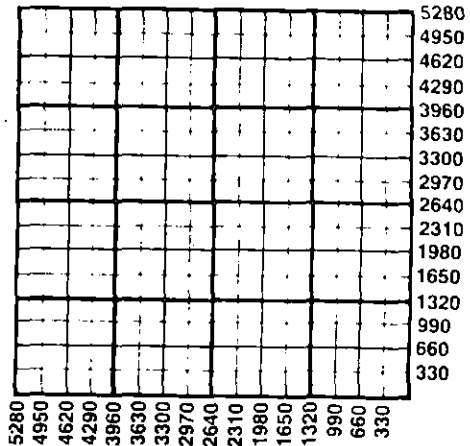
Lease Name..... Well #.....

Field Name.....

Producing Formation.....

Elevation: Ground.....KB.....

Section Plat



WATER SUPPLY INFORMATION

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Docket # .....  Repressuring

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Signature .....

Title..... Date .....

Subscribed and sworn to before me this .....day of.....  
19.....

Notary Public.....

Date Commission Expires.....

K.C.C. OFFICE USE ONLY  
F  Letter of Confidentiality Attached  
C  Wireline Log Received  
C  Drillers Time Log Received  
Distribution  
 KCC  SWD/Rep  NGPA  
 KGS  Plug  Other  
(Specify)

Sec...Twp...Rge...