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Kansas Corporation Commission Oil & Gas Conservation Division JUN 10 2004

Form ACO-1 September 1999 Form Must Be Typed

WELL COMPLETION FORM KCC WICHITA

WELL HISTORY - DESCRIPTION OF WELL & LEASE

| Operator: License # 33366 | API No. 15 - 037-21,612-0000 |
|--|--|
| Name: Charles D. Roye | County: Crawford |
| Address: PO Box 191, 102 N. Ozark | NE_SW_NW_NWec7_Twp28_SR.23_ \overline{\text{X}} East \square West |
| City/State/Zip: Girard, KS 66743 | feet from S / N (circle one) Line of Section |
| Purchaser:N/A | feet from E)/ W (circle one) Line of Section |
| Operator Contact Person: Marvin Strobel | Footages Calculated from Nearest Outside Section Corner: |
| Phone: (620) 362-4906 | (circle one) NE SE NW SW |
| Contractor: Name: MO-KAT Drilling | Lease Name: Segebartt Well #: 1 |
| License: 5831 | Field Name: Cherokee Coal Gas Fields |
| Wellsite Geologist: Thomas H. Oast | Producing Formation: Not completed |
| Designate Type of Completion: | Elevation: Ground: 975 Kelly Bushing: N/A |
| X New Well Re-Entry Workover | Total Depth: 675 Plug Back Total Depth: 675 |
| OilSWDSIOWTemp. Abd. | Amount of Surface Pipe Set and Cemented at 24 5 11 Feet |
| X Gas ENHR SIGW | Multiple Stage Cementing Collar Used? ☐ Yes ☑ No |
| Dry Other (Core, WSW, Expl., Cathodic, etc) | If yes, show depth setFeet |
| If Workover/Re-entry: Old Well Info as follows: | If Alternate II completion, cement circulated from 675 |
| Operator: | feet depth to surface w/ 100 sx cmt. |
| Well Name: | D.W. Flid M |
| Original Comp. Date: Original Total Depth: | Drilling Fluid Management Plan (Data must be collected from the Reserve Pit) |
| Deepening Re-perf Conv. to Enhr./SWD | Chloride content ppm Fluid volume bbls |
| Plug Back Plug Back Total Depth | Dewatering method used |
| Commingfed Docket No | Location of fluid disposal if hauled offsite: |
| Dual Completion Docket No | Location of haid disposal if natiled offsite. |
| Other (SWD or Enhr.?) Docket No | Operator Name: |
| | License No.: |
| 3/4/04 3/5/04 not complete Spud Date or Date Reached TD Completion Date or | Quarter Sec TwpS. R 🔲 East 🗌 West |
| Recompletion Date Recompletion Date | County: Docket No.: |
| | |
| | and geologist well report shall be attached with this form. ALL CEMENTING |
| nerein are complete and correct to the best of my knowledge. | te the oil and gas industry have been fully complied with and the statements |
| Signature: Kussell Sugs Russell S | uggs KCC Office Use ONLY |
| itte: Production Supervis Date: 5/4/04 | Letter of Confidentiality Attached |
| | ay If Denied, Yes Date: |
| Bobbi K. W | |
| State of Ka | |
| Notary Public Delich Wicher Exps | UIC Distribution |
| Date Commission Expires: 3/15/08 | |