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KCC WICHITA

KANSAS CORPORATION COMMISSION  
OIL & GAS CONSERVATION DIVISION

## WELL COMPLETION FORM

WELL HISTORY - DESCRIPTION OF WELL &amp; LEASE

Form ACO-1  
September 1999  
Form Must Be Typed

ORIGINAL

Operator: License # 32756Name: Double 7 Oil & GasAddress: 21003 Wallace Rd.City/State/Zip: Parsons Ks. 67357

Purchaser: \_\_\_\_\_

Operator Contact Person: Bruce SchulzPhone: (620) 316-423-0951Contractor: Name: Company Tools

License: \_\_\_\_\_

Wellsite Geologist: \_\_\_\_\_

Designate Type of Completion:

☒ New Well ☐ Re-Entry ☐ Workover☐ Oil ☐ SWD ☐ SLOW ☐ Temp. Abd.☐ Gas ☐ ENHR ☐ SIGW☒ Dry ☐ Other (Core, WSW, Expl., Cathodic, etc)

If Workover/Re-entry: Old Well Info as follows:

Operator: \_\_\_\_\_

Well Name: \_\_\_\_\_

Original Comp. Date: \_\_\_\_\_ Original Total Depth: \_\_\_\_\_

☐ Deepening ☐ Re-perf. ☐ Conv. to Enhr./SWD☐ Plug Back ☐ Plug Back Total Depth☐ Commingled ☐ Docket No. \_\_\_\_\_☐ Dual Completion ☐ Docket No. \_\_\_\_\_☐ Other (SWD or Enhr.?) ☐ Docket No. \_\_\_\_\_

|                   |                 |                    |
|-------------------|-----------------|--------------------|
| <u>19</u>         | <u>5-22-03</u>  | <u>10-18-03</u>    |
| Spud Date or      | Date Reached TD | Completion Date or |
| Recompletion Date |                 | Recompletion Date  |

API No. 15 - 099-23264-00-00County: LabetteNW - NW - NW Sec. 29 Twp. 31 S. R. 21 ☒ East ☐ West330 feet from S ☒ (circle one) Line of Section330 feet from E ☒ (circle one) Line of Section

Footages Calculated from Nearest Outside Section Corner:

(circle one) NE SE ☒ NW SWLease Name: Jones Well #: 4

Field Name: \_\_\_\_\_

Producing Formation: BartlesvilleElevation: Ground: N/A Kelly Bushing: \_\_\_\_\_Total Depth: 190' Plug Back Total Depth: \_\_\_\_\_Amount of Surface Pipe Set and Cemented at 20' FeetMultiple 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  
(Data must be collected from the Reserve Pit)

Chloride content \_\_\_\_\_ ppm Fluid volume \_\_\_\_\_ bbls

Dewatering method used Empty & Fill

Location of fluid disposal if hauled offsite: \_\_\_\_\_

Operator Name: \_\_\_\_\_

Lease Name: \_\_\_\_\_ License No.: \_\_\_\_\_

Quarter \_\_\_\_\_ Sec. \_\_\_\_\_ Twp. \_\_\_\_\_ S. R. \_\_\_\_\_ ☐ East ☐ West

County: \_\_\_\_\_ Docket No.: \_\_\_\_\_

**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 of 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: Kenneth MaffeiTitle: Owner Date: 12-11-03Subscribed and sworn to before me this 11th day of December

My Appt. Expires Feb. 2, 2004

Notary Public: Margaret A. PattersonDate Commission Expires: 2/2/2004

## KCC Office Use ONLY

☐ Letter of Confidentiality AttachedIf Denied, Yes ☐ Date: \_\_\_\_\_☐ Wireline Log Received☐ Geologist Report Received☐ UIC Distribution

Operator Name: Double 7 Oil & Gas Lease Name: Jones Well #: 4  
 Sec. 29 Twp. 31 S. R. 21 ☒ East ☐ West County: Labette

**INSTRUCTIONS:** Show upper and tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, line 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 test, along with final chart(s). Attach extra sheet if more space is needed. Attach copy of all Electric Wireline Logs surveyed. Attach final geological well site report.

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

### 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 | # Sacjs Used | Type and Percent Additives |
|--------------------|-------------------|---------------------------|-------------------|---------------|----------------|--------------|----------------------------|
| Surface Drill Well | 8 1/2" / 11"      | 20' 6 1/4"                |                   |               | Portland       | 5            |                            |
|                    |                   |                           |                   |               |                |              |                            |
|                    |                   |                           |                   |               |                |              |                            |

### 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<br>Specify Footage of Each Interval Perforated | Acid, Fracture, Shot, Cement Squeeze Record<br>(Amount and Kind of Material Used) | Depth |
|----------------|---|---|-------|
|                |   |   |       |
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| TUBING RECORD                                   | Size  | Set At  | Packer At   | Liner Run <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|---|---------|-------------|--|
| Date of First Resumerd Production, SWD or Enhr. | 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 ☐ Vented ☐ Sold ☐ Used on Lease (If vented, Sumit ACO-18.)

METHOD OF COMPLETION ☐ Open Hole ☐ Perf. ☐ Dually Comp. ☐ Commingled ☐ Other (Specify) \_\_\_\_\_

Production Interval

**ORIGINAL**

| SOLD BY                       | CASH        | C.O.D. | CHARGE | ON ACCT. | MDSE.<br>RET'D. | PAID OUT |         |
|-------------------------------|-------------|--------|--------|----------|-----------------|----------|---------|
| QUAN                          | DESCRIPTION |        |        |          |                 | PRICE    | AMOUNT  |
| 450                           | Por Hand    |        |        |          |                 |          | 2673 38 |
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